

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02858

FILED  
Apr 27, 2007  
Secretary of State

**Entity Name:** GARDEN OFFICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8500 WEST FLAGLER STREET  
#B-208  
MIAMI, FL 33144

**New Principal Place of Business:**

**Current Mailing Address:**

8500 WEST FLAGLER STREET  
# B-208  
MIAMI, FL 33144

**New Mailing Address:**

**FEI Number:** 59-2463976      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

TACORONTE, BERNARDO C  
8500 WEST FLAGLER STREET  
SUITE B-208  
MIAMI, FL 33144 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TACORONTE BERNARDO C

04/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GRISELL, GOMEZ  
Address: 8500 W FLAGLER ST  
City-St-Zip: MIAMI, FL 33144

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT ( ) Delete  
Name: TACORONTE, BERNARDO C.  
Address: 8500 W FLAGLER ST  
City-St-Zip: MIAMI, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD ( ) Delete  
Name: FERNANDEZ, CARLOS  
Address: 8500 WEST FLAGLER ST  
City-St-Zip: MIAMI, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD ( ) Delete  
Name: CHAVEZ, FRANK  
Address: 8500 W FLAGLER ST  
City-St-Zip: MIAMI, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TACORONTE BERNARDO C

DT

04/27/2007

Electronic Signature of Signing Officer or Director

Date