

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 17, 2006
Secretary of State**

DOCUMENT# N03000003715

Entity Name: BREEZE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:1555 NORTH TREASURE DRIVE
NORTH BAY VILLAGE, FL 33141 US**New Principal Place of Business:****Current Mailing Address:**7900 NW 155TH STREET
205
MIAMI LAKES, FL 33016 US**New Mailing Address:**C/O BLUE SKY MIAMI
1680 MICHIGAN AVE STE 908
MIAMI BEACH, FL 33139 US

FEI Number: 01-0822466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MARS, GARY M ESQ.
C/O HYMAN KAPLAN GANGUZZA SPECTOR & MARS
150 WEST FLAGLER ST. MUSEUM TWR., 27TH FL
MIAMI, FL 33130 US**Name and Address of New Registered Agent:**MICHAEL, GOMEZ ESQ.
1930 TYLER ST
HOLLYWOOD, FL 33020 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: M GOMEZ/RMS

10/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: STEELE, STEVEN
Address: 6970 SW 124 STREET
City-St-Zip: MIAMI, FL 33156 USTitle: VD () Delete
Name: MARQUES, PATRICIA
Address: 1555 NORTH TREASURE DRIVE 513
City-St-Zip: NORTH BAY VILLAGE, FL 33141 USTitle: TSD () Delete
Name: OJMAN, PABLO
Address: 1555 NORTH TREASURE DR 413
City-St-Zip: NORTH BAY VILLAGE, FL 33141 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: P MARQUEZ/RMS

D

10/17/2006

Electronic Signature of Signing Officer or Director

Date