

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 08, 2009**  
**Secretary of State**

DOCUMENT# N03000003928

**Entity Name:** VISTA DEL MAR CONDOMINIUM ASSOCIATION OF MB, INC.**Current Principal Place of Business:**1971-1985 BAY DR  
MIAMI BEACH, FL 33141**New Principal Place of Business:****Current Mailing Address:**2200 NW 102 AVE., #5  
DORAL, FL 33172**New Mailing Address:**4909 SW 74 CT  
MIAMI, FL 33155**FEI Number:** 35-2204884**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**C, ARTEAGA  
2200 NW 102 AVE  
STE #5  
DORAL, FL 33172 US**Name and Address of New Registered Agent:**PROCOM PROPERTY MANAGEMENT GROUP  
4909 SW 74 CT  
MIAMI, FL 33155 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: JOSE M. PAZOS

12/08/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SEIBERT, STEPHANIE  
Address: 1971 BAY DRIVE #10  
City-St-Zip: MIAMI BEACH, FL 33141

Title: T ( ) Delete  
Name: ADAMS, STEPHANIE  
Address: 1971 BAY DRIVE #8  
City-St-Zip: MIAMI BEACH, FL 33141

Title: S ( ) Delete  
Name: SOTO, MIGUEL  
Address: 1971 BAY DR. #1  
City-St-Zip: MIAMI BEACH, FL 33141

**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 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: STEPHANIE SEIBERT

PRES

12/08/2009

Electronic Signature of Signing Officer or Director

Date