2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 28, 2009
Secretary of State

DOCUMENT# N03000010628

Entity Name: SOLE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

17315 COLLINS AVENUE
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

17315 COLLINS AVENUE
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 26-1322537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZELKOWITZ, STEVEN W ESQ
C/O GRAY ROBINSSON P.A.
1221 BRICKELL AVE., SUITE 1650
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FEELEY, THOMAS
Address: 17315 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: V ( ) Delete
Name: CEVA, DAVID
Address: 17315 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: ST ( ) Delete
Name: CEVA, DAVID
Address: 17315 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: FERRI, ROBERTO
Address: 11538 NW 83 WAY
City-St-Zip: DORAL, FL 33178

Title: ST (X) Change ( ) Addition
Name: FEELEY, JEAN
Address: 17315 COLLINS AVENUE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: THOMAS FEELEY P 08/28/2009

Electronic Signature of Signing Officer or Director — Date