

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 19, 2009
Secretary of State**

DOCUMENT# N04000001412

Entity Name: MIAMI GARDENS PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

18300 NW 62ND AVE
STE 300
HIALEAH, FL 33015 US

New Principal Place of Business:

New Mailing Address:

PO BOX 4441
HIALEAH, FL 33014 US

Current Mailing Address:

18300 NW 62ND AVE
STE 300
HIALEAH, FL 33015 US

FEI Number: 55-0865716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, FERNANDO J
18300 NW 62ND AVE, STE 300
HIALEAH, FL 33015 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: DP () Delete
Name: SANCHEZ, FERNANDO J
Address: 18300 NW 62ND AVE, STE 300
City-St-Zip: HIALEAH, FL 33015

Title: D () Delete
Name: TORREGROSA, MABEL
Address: 18300 NW 62ND AVE STE 210
City-St-Zip: MIAMI GARDENS, FL 33015

Title: D () Delete
Name: RODRIGUEZ, YURAIMA
Address: 18300 NW 62ND AVE STE 330
City-St-Zip: MIAMI GARDENS, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: NGUYEN, WILLIAM
Address: 18300 NW 62ND AVE STE 130
City-St-Zip: MIAMI GARDENS, FL 33015

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: WILLIAM NGUYEN

D

03/19/2009

Electronic Signature of Signing Officer or Director

Date