2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Apr 30, 2007 8:00 am
Secretary of State
04-11-2007 90028 011 ****61.25

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04052007 Chg-NP CR2E037 (12/06)

DOCUMENT # N04000002808

1. Entity Name
MARINA MILE BUSINESS PARK MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
782 NW 42ND AVENUE SUITE 555 MIAMI, FL 33126	782 NW 42ND AVENUE SUITE 555 MIAMI, FL 33126

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-3528889 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RUBIN, JEFF E 1320 SOUTH DIXIE HIGHWAY SUITE 881 CORAL GABLES, FL 33146	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CABRERA, ANTONIO J JR. 782 NW 42ND AVENUE #555 MIAMI, FL 33126	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Raymond Mansfield 400 Santa Clara Trail Wellington, FL. 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RUBIN, JEFF E C/O 1320 SOUTH DIXIE HIGHWAY #881 CORAL GABLES, FL 33146	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Walter Dix 400 Santa Clara Trail Wellington, FL. 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD BIGGER, WILLIAM A C/O 3001 STATE ROAD 84 FORT LAUDERDALE, FL 33312	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Jeff Winepol 400 Santa Clara Trail Wellington, FL. 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Hector Izquierdo 400 Santa Clara Trail Wellington, FL. 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ray De Armas 400 Santa Clara Trail Wellington, FL. 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/6/07 954-791-9666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #