

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002833

FILED
Apr 30, 2008
Secretary of State

Entity Name: SOUTHERN PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12900 SW 128TH STREET
SUITE 100
MIAMI, FL 33186 US

Current Mailing Address:

14275 SW 142ND AVENUE
MIAMI, FL 33186 US

New Principal Place of Business:

12895 SW 132 STREET
SUITE 200
MIAMI, FL 33186 US

New Mailing Address:

12895 SW 132 STREET
SUITE 200
MIAMI, FL 33186 US

FEI Number: 20-2716524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIAY, CARLOS P.A.
3750 NW 87TH AVE.
SUITE 100
MIAMI, FL 33178 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: FERNANDEZ, MANUEL
Address: 12900 SW 128TH STREET, SUITE 100
City-St-Zip: MIAMI, FL 33186 US

Title: V () Delete
Name: BRUNA, JUAN
Address: 12900 SW 128TH STREET, SUITE 100
City-St-Zip: MIAMI, FL 33186 US

Title: T () Delete
Name: HERNANDEZ, YOLANDA
Address: 12900 SW 128TH ST, STE # 100
City-St-Zip: MIAMI, FL 33186 US

Title: S (X) Delete
Name: AGUIRRE, ALEXANDER
Address: 12900 SW 128TH STREET
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRUNA, JUAN
Address: 12895 SW 132 STREET, SUITE 200
City-St-Zip: MIAMI, FL 33186 US

Title: VPD (X) Change () Addition
Name: AGUIRRE, ALEXANDER
Address: 12895 SW 132 STREET, SUITE 200
City-St-Zip: MIAMI, FL 33186 US

Title: STD (X) Change () Addition
Name: ALLEGUE, LOURDES
Address: 12895 SW 132 STREET, SUITE 200
City-St-Zip: MIAMI, FL 33186 US

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: ALEXANDER AGUIRRE

VPD

04/30/2008

Electronic Signature of Signing Officer or Director

Date