

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 19, 2011**  
**Secretary of State**

DOCUMENT# N04000002833

**Entity Name:** SOUTHERN PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**9861 SW 184TH STREET  
PALMETTO BAY, FL 33157 US**New Principal Place of Business:**12895 SW 132 STREET  
SUITE 200  
MIAMI, FL 33186 US**Current Mailing Address:**12895 SW 132 STREET  
SUITE 200  
MIAMI, FL 33186 US**New Mailing Address:**9861 SW 184ST  
PALMETTO BAY, FL 33157 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:**BREDER, JOHN C  
9861 SW 184TH STREET  
PALMETTO BAY, FL 33157 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: JOHN C. BREDER

04/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PEREDO, MICHAEL  
Address: 12895 SW 132 STREET, SUITE 200  
City-St-Zip: MIAMI, FL 33186 US

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

Title: STD  
Name: SOUTO, LISSETTE  
Address: 12895 SW 132 STREET, SUITE 200  
City-St-Zip: MIAMI, FL 33186 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN C. BREDER

RA

04/19/2011

Electronic Signature of Signing Officer or Director

Date