2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000003611

FILED May 06, 2007 Secretary of State

Entity Name: CATALINA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4016 SW 132 AVE 2920 CATALINA STREET COCONUT GROVE, FL 33133

Current Mailing Address: New Mailing Address:

4016 SW 132 AVE 1172 S. DIXIE HWY

DAVIE, FL 33330 SUITE 396

CORAL GABLES, FL 33146

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIERA, RICARDO SZTER, MALGORZATA 4016 SW 132 AVE 1172 SOUTH DIXIE HWY

DAVIE, FL 33330 US SUITE 396 CORAL GABLES, FL 33146 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: MALGORZATA SZTER 05/06/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD () DeleteTitle:P (X) Change () AdditionName:RIERA, RICARDOName:SZTER, MALGORZATAAddress:4016 SW 132 AVEAddress:1172 SOUTH DIXIE HWY

Address: 4016 SW 132 AVE Address: 1172 SOUTH DIXTE HWY

City-St-Zip: DAVIE, FL 33330 City-St-Zip: CORAL GABLES, FL 33146

 Title:
 MGR () Delete
 Title:
 V (X) Change () Addition

 Name:
 BOZO, EDUARDO
 Name:
 MARTINEZ, HELENA

 Address:
 4016 SW 132 AVE
 Address:
 2922 CATALINA STREET

 City-St-Zip:
 DAVIE, FL 33330
 City-St-Zip:
 COCONUT GROVE, FL 33133

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 RIERA, MARIA O
 Name:

 Address:
 4016 SW 132 AVE
 Address:

 City-St-Zip:
 DAVIE, FL 33330
 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: MALGORZATA SZTER P 05/06/2007