2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N04000003687

1. Entity Name
PALM COVE CONDOMINIUM ASSOCIATION, INC.

FILED
06 JUN -8 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
701 BRICKELL AVENUE SUITE 2280 MIAMI, FL 33131	11981 SW 144 COURT SUITE 201 MIAMI, FL 33186

04272006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
10765 SW 108 AVE	11981 SW 144 ct
Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE #201
City & State MIAMI FL	City & State MIAMI FL
Zip 33176 Country FL	Zip 33186 Country FL

4. FEI Number
20-1961423
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HERNANDEZ, OMAR A
701 BRICKELL AVENUE
SUITE 2280
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name SUSANA TORRES FLORES

Street Address (P.O. Box Number is Not Acceptable)

10765 SW 108 AVE #304

City MIAMI FL **FL** Zip Code 33176

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 _____ 5/01/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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 HERNANDEZ, OMAR A 701 BRICKELL AVENUE SUITE 2280 MIAMI, FL 33131	☒ Delete	PD SUSANA TORRES-FLORES 10765 SW 108 AVE #304 MIAMI FL 33176	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BOSCHETTI, LUIS 2901 SW 8TH STREET SUITE 204 MIAMI, FL 33135	☒ Delete	SD CHARLES MINDER 10765 SW 108 AVE #301 MIAMI FL 33176	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BOSCHETTI, JOSE 2901 SW 8TH STREET SUITE 204 MIAMI, FL 33135	☒ Delete	TD FREDDY PABON 10755 #305 MIA FL 33176	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Director DEB MACGREGOR 10755 SW 108 AVE #107 MIA FL 33176	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Director JORGE SANCHEZ 10765 SW 108 AVE #206 MIA FL 33176	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2C 6/13	☐ Delete	500076385345	☐ 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: _____ 5/01/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #