

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005076

FILED
Jan 28, 2005
Secretary of State

Entity Name: GABLES VIEW OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8285 SW 106TH ST.
MIAMI, FL 33156

New Principal Place of Business:

300 ARAGON AVENUE
253
CORAL GABLES, FL 33134

Current Mailing Address:

8285 SW 106TH ST.
MIAMI, FL 33156

New Mailing Address:

300 ARAGON AVENUE
253
CORAL GABLES, FL 33134

FEI Number: 20-1172381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AILEEN ORTEGA, P.A.
2420 CORAL WAY
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

GABLES VIEW OFFICE LLC.
300 ARAGON AVENUE
253
CORAL GABLES, FL 33134 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: ALEX MENDOZA

01/28/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MENDOZA, ALEX
Address: 8285 SW 106TH ST.
City-St-Zip: MIAMI, FL 33156

Title: VD () Delete
Name: VALDES, OSCAR
Address: 8285 SW 106TH ST.
City-St-Zip: MIAMI, FL 33156

Title: SD () Delete
Name: VALDES, ROBERTO
Address: 8285 SW 106TH ST.
City-St-Zip: MIAMI, FL 33156

Title: TD () Delete
Name: VALDES, RICARDO
Address: 8285 SW 106TH ST.
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MENDOZA, ALEX
Address: 300 ARAGON AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: VD (X) Change () Addition
Name: VALDES, OSCAR
Address: 300 ARAGON AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: SD (X) Change () Addition
Name: VALDES, ROBERTO
Address: 300 ARAGON AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: TD (X) Change () Addition
Name: VALDES, RICARDO
Address: 300 ARAGON AVENUE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALEX MENDOZA

PD

01/28/2005

Electronic Signature of Signing Officer or Director

Date