2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2006
Secretary of State

DOCUMENT# N04000006876

Entity Name: MONSERRAT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4943 SW 75TH AVE
MIAMI, FL 33155

New Principal Place of Business:

216 SW 12 AVENUE
MIAMI, FL 33130

Current Mailing Address:

4943 SW 75TH AVE
MIAMI, FL 33155

New Mailing Address:

216 SW 12 AVENUE
MIAMI, FL 33130

FEI Number: 20-2281330 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEMUN, ABRAHAM
4943 SW 75TH AVE
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

JUAN, FIGUEROA
1428 BRIKELL AVENUE SUITE 206
MIAMI, FL 33131 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: JUAN FIGUEROA 10/11/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MEMUN, ABRAHAM
Address: 4943 SW 75TH AVE
City-St-Zip: MIAMI, FL 33155

Title: VSD ( ) Delete
Name: SALAME, SIMON
Address: 4943 SW 75TH AVE
City-St-Zip: MIAMI, FL 33155

Title: TD (X) Delete
Name: MEMUNE, JOSE
Address: 4943 SW 75TH AVE
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MEMUN, ABRAHAM
Address: 216 SW 12 AVENUE
City-St-Zip: MIAMI, FL 33130

Title: VSD (X) Change ( ) Addition
Name: SALAME, SIMON
Address: 216 SW 12 AVENUE
City-St-Zip: MIAMI, FL 33130

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ABRAHAM MEMUN PD 10/11/2006
Electronic Signature of Signing Officer or Director Date