


FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90202.029 ****61.25

DOCUMENT # N04000007772 1. Entity Name LE JEUNE EXECUTIVE BUILDING CONDOMINIUM ASSOCIATION, INC.						Apr 26, 2007 8:00 am Secretary of State 04-26-2007 90202 029 ****61.25	
Principal Place of Business 351 NW LE JEUNE ROAD SUITE 600 MIAMI, FL 33126				Mailing Address 351 NW LE JEUNE ROAD SUITE 600 MIAMI, FL 33126			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		01152007 Chg-NP CR2E037 (12/06)			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 75-3167280		Applied For Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
Zip	Country	Zip	Country				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
ARVESU, MANUEL 201 ALHAMBRA CIRCLE SUITE 502 MIMI, FL 33134				Name Hamid Bolooki			
				Street Address (P.O. Box Number is Not Acceptable) 351 N.W. LeJeune Rd. #600			
				City Miami FL Zip Code 33126			
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 <u><i>Hamid Bolooki</i></u> / HAMID BOLOOKI <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE <u>4/9/07</u>			
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 SOLORZANO, MADELINE 351 NW LE JEUNE ROAD MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		PD HAMID BOLOOKI 351 N.W. LeJeune Rd. #600 Miami, Fl. 33126 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NIN, FREDERICK L 351 NW LE JEUNE ROAD MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		VPD Juan Garces 351 N.W. LeJeune Rd. #503 Miami, Fl. 33126 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SANCHEZ-MEDINA, ROLAND 351 NW LE JEUNE ROAD MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		SD Antonio Barcia 351 N.W. LeJeune Rd. #402 Miami, Fl. 33126 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: <u><i>Hamid Bolooki</i></u> / HAMID BOLOOKI <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE <u>4/9/07</u> 305-643-5540 <small>Daytime Phone #</small>			