2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N04000008255

Entity Name: 411 SW 9 STREET CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8004 NW 158 TERRACE #335
MIAMI LAKES, FL 33016

New Principal Place of Business:

8004 NW 154 STREET #335
MIAMI LAKES, FL 33016

Current Mailing Address:

8004 NW 158 TERRACE #335
MIAMI LAKES, FL 33016

New Mailing Address:

8004 NW 154 STREET #335
MIAMI LAKES, FL 33016

FEI Number: 34-1976051 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

OLIVA, NELSON
8004 NW 158 TERRACE #335
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

OLIVA, NELSON
8004 NW 154 STREET #335
MIAMI LAKES, FL 33016 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: NELSON OLIVA 05/01/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: OLIVA, NELSON
Address: 8004 NW 158 TERRACE #335
City-St-Zip: MIAMI LAKES, FL 33016

Title: DV ( ) Delete
Name: ACEVEDO, MAURICIO
Address: 800 CLAUGHTON ISLAND DRIVE #2404
City-St-Zip: MIAMI, FL 33131

Title: DS ( ) Delete
Name: OLIVA, LEO
Address: 8023 NW 158 TERRACE
City-St-Zip: MIAMI, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: OLIVA, NELSON
Address: 8004 NW 154 STREET #335
City-St-Zip: MIAMI LAKES, FL 33016

Title: DV (X) Change ( ) Addition
Name: ACEVEDO, MAURICIO
Address: 8004 NW 154TH STREET #335
City-St-Zip: MIAMI, FL 33016

Title: DS (X) Change ( ) Addition
Name: OLIVA, LEO
Address: 8004 NW 154TH STREET 3335
City-St-Zip: MIAMI LAKES, FL 33016

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: NELSON OLIVA MNGR 05/01/2006
Electronic Signature of Signing Officer or Director Date