2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 25, 2008
Secretary of State

DOCUMENT# N04000008792

Entity Name: SUNSET PROFESSIONAL PLAZA, A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7300 SW 93 AVE
STE 210
MIAMI, FL 33173

New Principal Place of Business:

7374 SW 93 AVE
MIAMI, FL 33173

Current Mailing Address:

7300 SW 93 AVE
STE 210
MIAMI, FL 33173

New Mailing Address:

FEI Number: 90-0197761 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIL, AUGUSTO J
7300 SW 93RD AVE STE 210
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GIL, AUGUSTO
Address: 7300 SW 93 AVE, STE 210
City-St-Zip: MIAMI, FL 33173

Title: VPD ( ) Delete
Name: AMEIDA, RODNEY
Address: 7300 SW 93 AVE, STE 210
City-St-Zip: MIAMI, FL 33173

Title: TSD ( ) Delete
Name: GIL, JULIA
Address: 7300 SW 93 AVE, STE 210
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GIL, AUGUSTO J
Address: 7300 SW 93 AVE, STE 210
City-St-Zip: MIAMI, FL 33173

Title: SEC (X) Change ( ) Addition
Name: ALFARO, MARILYN
Address: 7300 SW 93 AVE, STE 210
City-St-Zip: MIAMI, FL 33173

Title: TRES (X) Change ( ) Addition
Name: ERICHSEN, PETER
Address: 7300 SW 93 AVE, STE 210
City-St-Zip: MIAMI, FL 33173

I hereby certify that the information supplied with this filing does not qualify 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: AUGUSTO J. GIL PD 09/25/2008

Electronic Signature of Signing Officer or Director — Date