2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

Daytime Phone #

DOCUMENT # N04000011001 1. Entity Name BIRD ROAD CONDOMINIUM ASSOCIATION INC.							l	02-26-2007	•	12 ****61	.25
Principal Place of Business 3800 SW 102 AVE. MIAMI, FL 33165			Mailing Address 7446 SW 48 ST. MIAMI, FL 33155						4144 6 41 5 4 11 6 51	1901 20 11 2010 1 (1	D(1784 B) 48 B)
2. Principal P	Place of Business - No P.O. Bo	ox # 3. Ma	3. Mailing Address								
Suite, Apt.	#, etc.	Su	Suite, Apt. #, etc.				01262007	Chg-NP	CR2E	37 (12/06)	
City & Stat	6	C	City & State				4. FEI Numbe 68-0597	705		Applied For Not Applicable	
Zip	Zip Country		Zip Co		intry	5. Certificate of Status Desired					
6. Name and Address of Current Registered Agent							7. Name and	Address of New	Registered	Agent	
VILAR PRO 7446 SW 4 MIAMI, FL		Street Address (P.O. I			P.O. Box Numbe	r is Not Acceptab	le)	· ·			
					City				FI	Zip Cod	e
	named entity submits this stations of registered agent. Signature, typed or printed name of regis) Lei	lei		-,		ed agent, or both	n, in the State of F	florida. I am $\sqrt{29}$	familiar with,	and accept
Filing Fee is \$61.25 Toue by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.			כ	\$5.00 May Bo Added to Fees	•		k payable to	
10.	OFFICERS	AND DIRECTORS	i	11.		Α	DDITIONS/CHA	NGES TO OFFIC	ERS AND D	IRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TZE, CHING HSIANG 3800 SW 102TH AVE, # MIAMI, FL 33165	205	☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TRIMBLE, KENNETH 3800 SW 102ND AVE, # MIAMI, FL 33165	216	☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GONZALEZ, SANDRA 3800 SW 102ND AVE, # MIAMI, FL 33165	108	X Delete		E ET ADDRESS - ST-ZIP	1000 N	SE G C 00 600 AMI, F	le Peral 102 10 10 3	tal E # 3165	□ Change - //2_	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	SD FERNANDEZ, FERNANI 3800 SW 102ND AVE, # MIAMI, FL 33165		☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete		1					Change	☐ Addition
indicated of the cor	certify that the information sup I on this report or supplements poration or the receiver or tru , or on an attachment with an	al report is true and stee empowered to	accurate and that execute this report	my signat t as requi	lure shall hav red by Chap	ve the s	ame legal effec	as if made unde	roath; that I	am an officer	or director