

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2008 8:00 am
Secretary of State

06-30-2008 90021 034 ****61.25

DOCUMENT # N04000011001					
1. Entity Name BIRD ROAD CONDOMINIUM ASSOCIATION INC.					
Principal Place of Business 3800 SW 102 AVE. MIAMI, FL 33165			Mailing Address 7446 SW 48 ST. MIAMI, FL 33155		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 4744 NW 114 ave			
Suite, Apt. #, etc.		Suite, Apt. #, etc. # 105			
City & State		City & State Doral, FL		4. FEI Number 68-0597705	
Zip		Country		Zip 33178	
Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
VILAR PROPERTY MANAGEMENT 7446 SW 48 ST. MIAMI, FL 33155				Name <u>Sigfried Rivera, Lerner De La Torre</u> Street Address (P.O. Box Number is Not Acceptable) <u>201 Alhambra Circle</u> Suite <u>603</u> City <u>Coral Gables</u> <u>FL</u> Zip Code <u>33134</u>	
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>[Signature]</u> <small>Signature typed or printed name of registered agent and title if applicable</small>				DATE <u>6-17-08</u> <small>(NOTE: Registered Agent signature required when transferring)</small>	
Filing Fee is \$61.25 Due by September 12, 2008		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 PD NAME TZE, CHING HSIANG STREET ADDRESS 3800 SW 102TH AVE, # 205 CITY-ST-ZIP MIAMI, FL 33165	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VPD NAME RODRIGUEZ-MAZIBONA, SILVIA STREET ADDRESS 3800 SW 102ND AVENUE # 104 CITY-ST-ZIP MIAMI, FL 33165	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE TD NAME FERNANDEZ, FERNANDO STREET ADDRESS 3800 SW 102ND AVE., #122 CITY-ST-ZIP MIAMI, FL 33165	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME CAMINA, FRANCISCO STREET ADDRESS 3800 SW 102ND AVE, #109 CITY-ST-ZIP MIAMI, FL 33165	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SD NAME TRUILLO, MARTHA STREET ADDRESS 3800 SW 102ND AVENUE #14 CITY-ST-ZIP MIAMI, FL 33165	<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>Fernando Fernandez</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>6-25-08</u> <small>Daytime Phone #</small>	