2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000011759

FILED Sep 07, 2006 Secretary of State

Entity Name: SERENITY ON THE RIVER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1200 E PONCE DE LEON BLVD 1200 PONCE DE LEON BOULEVARD

MIAMI, FL 33131 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

1200 E PONCE DE LEON BLVD 1200 PONCE DE LEON BOULEVARD

MIAMI, FL 33131 CORAL GABLES, FL 33134

FEI Number: 20-2037086 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

HERNANDEZ, OMAR A RAULIN, KURT A 1200 E PONCE DE LEON BLVD 1200 PÓNCE DE LEON BOULEVARD

MIAMI, FL 33134 CORAL GABLES, FL 33134

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: KURT A RAULIN 09/07/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

HERNANDEZ, OMAR A HERNANDEZ, OMAR A Name: Name:

Address: 1200 E PONCE DE LEON BLVD Address: 1200 PONCE DE LEON BOULEVARD

City-St-Zip: MIAMI, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: Title: (X) Change () Addition () Delete BOSCHETTI, LUIS

Name: Name: BOSCHETTI, LUIS Address: 1200 E PONCE DE LEON BLVD Address: 1200 PONCE DE LEON BOULEVARD

City-St-Zip: MIAMI, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete Title: (X) Change () Addition

BOSCHETTI, JOSE BOSCHETTI, JOSE Name: Name:

1200 E PONCE DE LEON BLVD 1200 PONCE DE LEON BOULEVARD Address: Address:

City-St-Zip: MIAMI, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

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: OMAR A HERNANDEZ Ρ 09/07/2006