

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : FRANK AMSALEM, P.A.

Account Number : I20040000036
Phone : (305)534-8171

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REGISTERED AGENT CHANGE

CHAMPS ELYSEES CONDOMINIUM ASSOCIATION, INC.

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05/12/05

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05/12/05

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.050 the undersigned corporation organized under the laws of t	
submits the following statement in order to change its reg the State of Florida. 1. The name of the corporation is: Champs Elysees Cor	istered office or registered agent, or both, in
2. The mailing address of the corporation is: 1619 Lenox	Ave., Miami Beach, Fl 33139
3. Date of incorporation/qualification; 01/20/2005	Document number: N\$000000656
4. The name and address of the current registered agent and	
Frank Amsalem, Esq.	
777 Arthur Godfrey Road, Second Flo	or
Miami Beach, FL 33140	
5. The name and address of the new registered agent and of	ffice: (P. O. Box Not Acceptable)
Diego Kojnover	
1301 NW 89th Court, Suite 219	
Miami, FL 33172	
The street address of its registered office and the street ad agant, as changed, will be identical.	dress of the business office of its registered
Buch change was authorized by resolution duly adopted by authorized by the board.	y its board of directors or by an officer so
(Signary's of an officer, chairman or vice chairman of the board)	05/09/2005
	(Date)
Diego Kojnover, Vice President (Printed or typed game and title)	
raving over, vice President (Printed or typed name and title) raving over namea as registered agent and to accept service appointment as registered further agree to comply with the provisions of all statute performings of my duties, and I am familiar with and accornection agent.	vice of process for the abovc stated d agent and agree to act in this capacity. s relative to the proper and complete ept the obligation of my position as
	05/09/2005
(Signifure of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35	
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DIVISION OF CORPORATIONS P.O. Box 6327	TALLAHASSEE, FL 32314