

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000656

FILED
Apr 27, 2007
Secretary of State

Entity Name: CHAMPS ELYSEES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1619 LENOX AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1301 NW 89 CT.
218
DORAL, FL 33139

New Mailing Address:

9786 NW 29TH TERRACE
MIAMI, FL 33172

FEI Number: 56-2518179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TORRES, GABRIEL E
1301 NW 89TH COURT
SUITE 219
DORAL, FL 33172 US

Name and Address of New Registered Agent:

TORRES, GABRIEL E
9786 NW 29TH TERRACE
MIAMI, FL 33172 US

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: GABRIEL TORRES

04/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PRABHAKAR, MAHAVEER P
Address: 9595 COLLINS AVE #909N
City-St-Zip: SURFSIDE, FL 33154

Title: DVP () Delete
Name: KOJNOVER, DIEGO
Address: 1301 NW 89TH COURT SUITE 219
City-St-Zip: DORAL, FL 33172

Title: DST () Delete
Name: TORRES, GABRIEL E
Address: 1301 NW 89TH COURT SUITE 219
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PRABHAKAR, MAHAVEER P
Address: 9595 COLLINS AVE # 909 N
City-St-Zip: SURFSIDE, FL 33154

Title: DVP (X) Change () Addition
Name: KOJNOVER, DIEGO
Address: 900 BAY DR. APT 412
City-St-Zip: DORAL, FL 33172

Title: DST (X) Change () Addition
Name: TORRES, GABRIEL E
Address: 9786 NW 29TH TERRACE
City-St-Zip: MIAMI, FL 33172

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: GABRIEL TORRES

DST

04/27/2007

Electronic Signature of Signing Officer or Director

Date