

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 18, 2007
Secretary of State**

DOCUMENT# N05000001683

Entity Name: MIRADOR 1035 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1035 WEST AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

C/O BLUE SKY MIAMI
1680 MICHIGAN AVE STE 908
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-2580391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R MAXWELL SHEINER
BLUE SKY MIAMI
1680 MICHIGAN AVE STE 908
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRAHA ANAVIM, LAUREN N
Address: 1035 WEST AVE # 501
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: JIMENEZ, VICTORINA H
Address: 1035 WEST AVE # 403
City-St-Zip: MIAMI BEACH, FL 33139

Title: STD (X) Delete
Name: LIPSKIER, ZEV
Address: 1035 WEST AVE # 505
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LIPSKIER, ZEV
Address: 1035 WEST AVE # 505
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change () Addition
Name: JIMENEZ, VICTORINA H
Address: 1035 WEST AVE # 403
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VICTORIA JIMENEZ/YDC

D

01/18/2007

Electronic Signature of Signing Officer or Director

_____ Date