2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002329

FILED Apr 10, 2007 Secretary of State

Entity Name: ROMI GARDENS CONDOMINIUM ASSOCIATION, INC.

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

2101 EAST HALLANDALE BEACH BOULEVARD 2701 W OAKLAND PARK BLVD

SUITE 304 103

HALLANDALE BEACH, FL 33009 FORT LAUDERDALE, FL 33311

Current Mailing Address: New Mailing Address:

2101 EAST HALLANDALE BEACH BOULEVARD 2701 W OAKLAND PARK BLVD SUITE 304 103

HALLANDALE BEACH, FL 33009 FORT LAUDERDALE, FL 33311

FEI Number: 20-1704629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BITON, MOSHE BITON, MOSHE

2101 EAST HALLANDALE BEACH BOULEVARD 2701 W OAKLAND PARK BLVD

SUITE 304 103 HALLANDALE BEACH, FL 33009 US FORT LAUDERDALE, FL 33311 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: 04/10/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: BITON, AMNON Name: BITON, AMNON

Address: 2101 EAST HALLANDALE BEACH BOULEVARD #304 Address: 2701 W OAKLAND PARK BLVD # 103

City-St-Zip: HALLANDALE BEACH, FL 33009 City-St-Zip: FORT LAUDERDALE, FL 33311

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

Name: BITON, MOSHE Name: BITON, MOSHE

Address: 2101 EAST HALLANDALE BEACH BOULEVARD #304 Address: 2701 W OAKLAND PARK BLVD # 103
City-St-Zip: HALLANDALE BEACH, FL 33009 City-St-Zip: FORT LAUDERDALE, FL 33311

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

Name: SHARABI, GUY Name: SHARABI, GUY

Address: 2101 EAST HALLANDALE BEACH BOULEVARD #304 Address: 2701 W OAKLAND PARK BLVD # 103
City-St-Zip: HALLANDALE BEACH, FL 33009 City-St-Zip: FORT LAUDERDALE, FL 33311

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: AMNON BITON PD 04/10/2007