2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N0500003548			F 2.10 F 10.20 F 10.20	
1. Entity Name THE NOLOBI CONDOMINIUM AS				
			06 AUG - 7 PM	2: 07
Principal Place of Business 524 41 STREET MIAMI BEACH, FL 33140	EET 524 41 STREET		SECRETARY OF STATE TALLAHASSEE. FLORIDA	
2. Principal Place of Business 935 EUCUID AVE.				
Suite, Apt. #, etc.	ot. #, etc. Suite, Apt. #, etc.		07312006 Chg-NP CR	2E037 (4/06)
City & State MIANI BEACH, FL	FL City & State BEACH, FL		4. FEI Number 20-2697034	Applied For Not Applicable
Zip Country 33139 U.S.A	Zip 33139 CC	ountry S. 4	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent				
Name A			NDREW LA CERVA	
l l			P.O. Box Number is Not Acceptable)	
			935 EUCLIO AVE #4	
		City MI	arii BEACH	FL 33500
8. 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. I am familiar with, and accept the obligations of registered agent.				
Quelle Do Bron 3000 - 713, 12001				
SIGNATURE Signature, typed or printed name of registative region and title of applicable (NOTE: Registered Agent signature required when reinstating) DATE OUT OF THE SIGNATURE (NOTE: Registered Agent signature required when reinstating)				
Amended AR is \$61.25 9. Election Campaign Financing \$5.00 May Be Added to Fees Added to Fees Florida Department of State				
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE NAME	☐ Delete TIT	ME AND	REW LA CERVA	Change 🗌 Addition
STREET ADDRESS CILY-S1-ZIP			FUCLID AVE \$4 AMI BEACH, FL 331	90
THE	☐ Delete TIT	LE DY		Change Addition
NAME: STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	ME SAN REET ADDRESS 153	DRA PERLMAN 2 DREXEL AVE#401	,
CITY-S1-ZIP			AMI BEACH, FL 33	
TITLE	☐ Delete TiT			Change
NAME Street address	NA STI	REET ADORESS 100/	NA VERDES ONE ISTAVE	
CITY-ST ZIP		14-ST-ZIP 1714	MI SIMPRES, FL 331	
TITLE NAME	☐ Delete TIT	ILE ME	<u> </u>	Change Addition
STREET ADDRESS		REET ADDRESS	300078629 100103001	
CITY-S1-ZIP TITLE	☐ Delete III	IY-S1-ZIP	00/11/00 01000 00	☐ Change ☐ Addition
NAME .	NA NA	ME		
STREET ADDRESS CITY-ST-ZIP		REET ADDRESS TY-\$1-Zip	,	
MILE		TLE		Change Addition
name Street address		me Reet adoress		
CITY-ST-ZIP		IY-\$1-ZIP		
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: LUCITUM LA CENTA 7/31/2006 (305) 76/3366 SIGNATURE AND TYPED OR PRINTED NAME DE SIGNING OFFICER OR DIRECTOR Date Date Daylore Proces AND REW LA CERTA 20 8/0				
ANDREW LA CERVA				