2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005838

FILED Apr 02, 2009 Secretary of State

Entity Name: MIMO ON THE BEACH III CONDOMINIUM ASSOCIATION, INC.

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

305-15 69TH STREET 305 69TH STREET MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

305 ALCAZAR AVE. 7446 SW 48 ST CORAL GABLES, FL 33134 MIAMI, FL 33155

FEI Number: 20-3624292 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:

VILAR PROPERTY MANAGEMENT VILAR PROPERTY MANAGEMENT 305 ALCAZAR AVE. 7446 SW 48 ST CORAL GABLES, FL 33134 US MIAMI, FL 33155 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: 04/02/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PVD () Delete (X) Change () Addition

HOUSEN, CAROL HOUSEN, CAROL Name: Name:

7330 OCEAN TERRACE UNIT 2001 Address: 7330 OCEAN TERRACE UNIT 2001 Address:

City-St-Zip: MIAMI, FL 33141 City-St-Zip: MIAMI, FL 33141

(X) Change () Addition Title: SD () Delete Title: SD Name: MEANS, KABRINA Name: MEANS, KATRINA

Address: 5841 SW 116 STREET Address: 5841 SW 116 STREET City-St-Zip: MIAMI, FL 33156 City-St-Zip: MIAMI, FL 33156

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

MENDOZA, ARLENE Name: LOPEZ, ILEANA Name: 13211 SW 49 STREET Address: Address: 1877 SW 11 ST City-St-Zip: MIAMI, FL 33175 City-St-Zip: MIAMI, FL 33135

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: CAROL HOUSEN PD/T 04/02/2009