

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 28, 2009
Secretary of State**

DOCUMENT# N05000005927

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

Current Principal Place of Business:

350 75TH STREET, APT. 202
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

350 75TH STREET, APT. 202
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 20-3624322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, ENRIQUE
350 75TH STREET, APT. 202
MIAMI BEACH, FL 33141 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: SANCHEZ, ENRIQUE
Address: 8923 SW 108 CIRCLE COURT
City-St-Zip: MIAMI, FL 33176

Title: S () Delete
Name: PELAEZ, ILEANA
Address: 6830 SW 51 ST.
City-St-Zip: MIAMI, FL 33155

Title: TD () Delete
Name: SAMOLESKI, DOMINICK
Address: 350 75 STREET, UNIT #108
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: CAMARAZA, WILLIAM
Address: 1078 NE 94 ST.
City-St-Zip: MIAMI, FL 33188

Title: D () Delete
Name: CAGLE, PETER
Address: 6701 SUNSET DRIVE, SUITE # 112
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP (X) Change () Addition
Name: CAMARAZA, WILLIAM
Address: 1211 MANNOR DRIVE S.
City-St-Zip: WESTON, FL 33326

Title: D (X) Change () Addition
Name: CAGLE, PETER
Address: 2555 PONCE DE LEON BLVD, SUITE # 320
City-St-Zip: CORAL GABLES, FL 33134

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: ENRIQUE SANCHEZ

PD

03/28/2009

Electronic Signature of Signing Officer or Director

Date