2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006430

FILED Jun 10, 2008 Secretary of State

Entity Name: MIRADOR 1200 CONDOMINIUM ASSOCIATION, INC.

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

1200 WEST AVE

MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1200 WEST AVE MIAMI BEACH, FL 33139

FEI Number: 20-3140477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ARMPRIESTER, JACOB A 401 FAIRWAY DRIVE SUITE 300 DEERFIELD BEACH, FL 33441 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:

\L. _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WEXLER, LARRY
 Name:
 LARES, HENRY

 Address:
 1200 WEST AVE #1506
 Address:
 1200 WEST AVE #817

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: VPD () Delete Title: () Change () Addition

 Name:
 WALKER, MICHAEL
 Name:

 Address:
 1200 WEST AVE # 606
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

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

 Name:
 LARES, HENRY
 Name:
 WEXLER, LARRY

 Address:
 1200 WEST AVE # 817
 Address:
 1200 WEST AVE # 1506

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

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: HENRY LARES PD 06/10/2008