## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000007718

FILED May 01, 2006 Secretary of State

Entity Name: BISCAYNE GARDENS 2, A CONDOMINIUM ASSOCIATION, INC.

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

1840 CORAL WAY STE 102 1840 CORAL WAY CORAL GABLES, FL 33145 SUITE 102

MIAMI, FL 33145

Current Mailing Address: New Mailing Address:

1840 CORAL WAY STE 102 1840 CORAL WAY CORAL GABLES, FL 33145 SUITE 102 MIAMI, FL 33145

FEI Number: 61-1494712 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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:

PALENZUELA, MARIANO
1840 CORAL WAY STE 102
CORAL GABLES, FL 33145
US
PALENZUELA, MARIANO
1840 CORAL WAY
SUITE 102
MIAMI, FL 33145 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: MARIANO PALENZUELA 05/01/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:DP () DeleteTitle:DP (X) Change () AdditionName:PALENZUELA, MARIANOName:PALENZUELA, MARIANOAddress:1840 CORAL WAY STE 102Address:1840 CORAL WAY SUITE 102

City-St-Zip: CORAL GABLES, FL 33145 City-St-Zip: MIAMI, FL 33145

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition Name: ORELLANA, JORGE Name: ORELLANA, JORGE

 Address:
 1840 CORAL WAY STE 102
 Address:
 1840 CORAL WAY STE 102

 City-St-Zip:
 CORAL GABLES, FL 33145
 City-St-Zip:
 MIAMI, FL 33145

Title: DTS ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 POSELY, ADRIENE
 Name:

 Address:
 P O BOX 01-0883
 Address:

 City-St-Zip:
 MIAMI, FL 33101
 City-St-Zip:

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: MARIANO PALENZUELA DP 05/01/2006