2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED

OF SIGNING OFFICER OR DIRECTOR

Aug 14, 2006 8:00 am Secretary of State 07-11-2006 90023 022 ****61.25 **DOCUMENT # N05000008237** 05-01-2006 90387 024 ****61.25 THE EMPIRE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 66023025 747 4TH ST STE #200A 747 4TH ST STE #200A MIAMI BCH, FL 33139 MIAMI BCH, FL 33139 2. Principal Place of Business 3. Mailing Address 07052006 Chg-NP Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (4/06) Applied For City & State City & State Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FOLLAND, CHRISTIAN 747 4TH ST STE #200A Street Address (P.O. Box Number is Not Acceptable) MIAMI BCH, FL 33139 City Zip Code 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 em familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstiting) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by September 6, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TILE ☐ Debte TITLE ☐ Change ☐ Addition ROUSSEAU, DANIEL NAME NAME 747 4TH ST STE #200A STREET ADDRESS STREET ADDRESS CITY-SI-ZIP MIAMI BCH, FL 33139 CITY-ST-ZIP MLE ☐ Delete TITLE Change ☐ Addition NAKASH, JOE MALE MALLES STREET ADDRESS 747 4TH ST STE #200A STREET ADDRESS MIAMI BCH, FL 33139 CITY-SI-ZIP CITY-ST-ZIP IUTE ☐ Delete TITLE Change ☐ Addition FOLLAND, CHRISTIAN MAAGE MARKE 747 4TH ST STE #200A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BCH, FL 33139 CITY-ST-ZP TITLE Oetete IIILE Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP mu IME ☐ Cefete ☐ Channe Addition HAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZP TITLE ☐ Change ☐ Addition ☐ (Delete TITS F NAME NUME STREET ADDRESS STREET ADDRESS CITY-ST-70P CITY-51-70P 12. Thereby certify that the information supplied with this tilling 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 got all civate and that my signature shall have the same legal effect as if made under cash; that I am an officer or director of the corporation or the receiver or trustee empower of the electute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 6 or on an attachment with an address, with all growther empowered. SIGNATURE: _

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