

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009703

FILED
Jan 25, 2009
Secretary of State

Entity Name: TAMAMI BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14021-14031 SW 143 CT.
MIAMI, FL 33186

New Principal Place of Business:

14021-14031 SW 143 CT.
1-21
MIAMI, FL 33186

Current Mailing Address:

PO BOX 228055
MIAMI, FL 33222

New Mailing Address:

FEI Number: 41-2195461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MP PROPERTY MANAGEMENT
8390 NW 53ST #313
DORAL, FL 33166 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: CAO, ROBERT
Address: 7364 SW 48TH STREET
City-St-Zip: MIAMI, FL 33155

Title: P () Delete
Name: PULIDO, ALICIA
Address: 16583 SW 66 ST.
City-St-Zip: MIAMI, FL 33173

Title: ST () Delete
Name: CABRERA, ILEANA
Address: 13755 SW 38 ST
City-St-Zip: MIAMI, FL 33175

Title: VP () Delete
Name: BROLLEY, MARIA
Address: 8360 WEST FLAGLER ST #200
City-St-Zip: MIAMI, FL 33144

Title: VP () Delete
Name: PEREZ, EDITH
Address: 14055 SW 143 CT, UNIT 10-14
City-St-Zip: MIAMI, FL 33186

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

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

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: ROBERTO CAO

P

01/25/2009

Electronic Signature of Signing Officer or Director

Date