2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011657

FILED Nov 03, 2009 Secretary of State

Entity Name: 8300 BYRON AVE. CONDOMINIUM ASSOCIATION, INC.

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

8264 NW 115 CT 8300-10 BYRON AVE. **DORAL, FL 33178**

MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

7600 W 20 AVE STE 217 8300-10 BYRON AVE. HIALEAH, FL 33016

MIAMI BEACH, FL 33141

FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

TERRA ASSOCIATION MNGT. 7600 W 20TH AVE STE 217 HIALEAH, FL 33016

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: TERESA LAUGGER

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BARILLAS, CESAR PEREZ-AGRAMONTE, JULIO A Name: Name: 8264 NW 115 CT Address: 8300 BYRON AVE. #5 Address:

City-St-Zip: DORAL, FL 33178 City-St-Zip: MIAMI BEACH, FL 33141

Title: (X) Change () Addition () Delete BRAVO, MAURICIO Name: BOLOIX, DAVID Name: Address: 8300 BYRON AVE #1 Address: 8300 BYRON AVE #3 City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33141

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

GUERRA, RICARDO ARNOLD, PHILLIPPE Name: Name: Address: 8300 BYRON AVE #12 Address: 8300 BYRON AVE # 6 City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33141

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

Name: PEREZ, BARBARA Name: PINION, DOMINIQUE Address: 8300 BYRON AVE #11 Address: 8310 BYRON AVE #12 City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33141

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: JULIO A. PEREZ-AGRAMONTE Ρ 11/03/2009