

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05082

FILED
Feb 05, 2009
Secretary of State

Entity Name: MILAM COMMERCIAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7035-G SW 47 STREET
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

PO BOX 55-7247
MIAMI, FL 33255 US

New Mailing Address:

FEI Number: 59-2527707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MUNILLA, NORKA
7035-G SW 47 STREET
MIAMI, FL 33155 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: P () Delete
Name: LUNCES, JOAQUIN
Address: 7047 SW 47 ST
City-St-Zip: MIAMI, FL 33155

Title: V () Delete
Name: PINO, WILLIAM
Address: 7035-B SW 47 STREET
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: PINO, WILLIAM
Address: 7035-B SW 47TH STREET
City-St-Zip: MIAMI, FL 33155

Title: T () Delete
Name: MAYNARD, CARL
Address: 7079 SW 47 STREET
City-St-Zip: MIAMI, FL 33155

Title: S () Delete
Name: MUNILLA, NORKA
Address: 7035-G SW 47 ST
City-St-Zip: MIAMI, FL 33155

Title: AS () Delete
Name: RODRIGUEZ, CEARO
Address: 7063 SW 47TH STREET
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LUACES, JOAQUIN
Address: 7047 SW 47 ST
City-St-Zip: MIAMI, FL 33155

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

Title: D (X) Change () Addition
Name: RUBIO, MANNY
Address: 7081 SW 47TH STREET
City-St-Zip: MIAMI, FL 33155

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: CARL MAYNARD

TREA

02/05/2009

Electronic Signature of Signing Officer or Director

Date