Majorca Isles I Condominium Association, Inc.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 17, 2008 8:00 am Secretary of State **DOCUMENT # N06000002122** 04-17-2008 90160 001 *2,266.25 MAJÓRCA ISLES I CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 66007032 21405 NW 13TH COURT 21405 NW 13TH COURT MIAMI GARDENS, FL 33169 MIAMI GARDENS, FL 33169 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02132008 Chg-NP CR2E037 (12/06) 4. FEI Number ARRUED FOR Applied For City & State City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GLAZER AND ASSOCIATES, P.A. 1920 EAST HALLANDALE BEACH BLVD. Street Address (P.O. Box Number is Not Acceptable) 806 HALLANDALE, FL 33009 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 am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. \Box Florida Department of State Due by May 1, 2008 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PRES TITLE Delete TITLE PD ☐ Change **X** Addition CALVERT, TIKINIA NAME NAME SANON, JASON STREET ADDRESS 21417 NW 13TH COURT STREET ADDRESS 21431 NW 13TH COURT #216 CITY-ST-ZIP MIAMI GARDENS, FL 33169 CITY-ST-ZIP MIAMI CARDENS, FL 33169 SECY ☐**X**Oelete VPD TITLE TITLE ☐ Change **X** Addition DESRONVIL, SAINTANIA JOSEPH, IWAN NAME NAME 21407 NW 13TH COURT STREET ADDRESS 21425 NW 13TH COURT #313 STREET ADDRESS MIAMI GARDENS, FL 33169 CITY-ST-ZIP MIAMI GARDENS, FL 33169 CITY-ST-ZIP Delete SD **TRES X** Addition TITLE TITLE ☐ Change JACKSON, VELDIA EKPO, UDUAK NAME NAME 21429 NW 13TH COURT #615 21429 NW 13TH COURT STREET ADDRESS STREET ADDRESS MIAMI GARDENS, FL 33169 CITY-ST-ZIP MIAMI GARDENS, FL 33169 CITY-ST-ZIP לוד Addition ☐ Defete Change TITLE TITLE SAINTILLMON, RONNIEKA-SOLOMON NAME 21425 NW 13TH COURT #513 STREET ADDRESS STREET ADDRESS MIAMI GARDENS, FL 33169 CITY-ST-ZIP CITY-ST-ZIP D Addition TITLE ☐ Delete TITLE Change BAROULETTE, JEAN NAME NAME 21423 NW 13TH COURT STREET ADDRESS STREET ADDRESS MIAMI GARDENS, FL 33169 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information subplied with his filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental beyond is frue and accurate and that my 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 employeed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

FILED

Daytime Phone #