

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002787

FILED
Apr 25, 2008
Secretary of State

Entity Name: PARK VIEW AT BRICKELL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

150 S.E. 2ND AVE.
SUITE 807
MIAMI, FL 33131

New Principal Place of Business:

396 ALHAMBRA CIRCLE
SUITE #230
CORAL GABLES, FL 33134

Current Mailing Address:

150 S.E. 2ND AVE.
SUITE 807
MIAMI, FL 33131

New Mailing Address:

396 ALHAMBRA CIRCLE
SUITE #230
CORAL GABLES, FL 33134

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FERNANDEZ VALLE, MARIA
3750 N.W. 87TH AVE.
SUITE 100
MIAMI, FL 33178 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: PA () Delete
Name: MARTINEZ, MAURICIO
Address: 150 S.E. 2ND AVE., SUITE 807
City-St-Zip: MIAMI, FL 33131

Title: SA () Delete
Name: MALABET, JOSE
Address: 150 S.E. 2ND AVE., SUITE 807
City-St-Zip: MIAMI, FL 33131

Title: VA () Delete
Name: SARABIA, CARLOS
Address: 150 S.E. 2ND AVE., SUITE 807
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: FERNANDEZ-VALLE, MARIA
Address: 150 S.E. 2ND AVE., SUITE 807
City-St-Zip: MIAMI, FL 33131

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:

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: MAURICIO MARTINEZ

PA

04/25/2008

Electronic Signature of Signing Officer or Director

Date