

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2007 OCT 29 AM 11:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # N06000004383			
1. Entity Name RICE 3333 CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 2830 SR 84 117 FORT LAUDERDALE, FL 33312		Mailing Address 2830 SR 84 117 FORT LAUDERDALE, FL 33312	
2. Principal Place of Business - No P.O. Box # 10 ARAGON AVE. Suite, Apt. #, etc. # LP-1402 City & State Coral Gables, FL Zip 33134 Country USA		3. Mailing Address 10 ARAGON AVE. Suite, Apt. #, etc. # LP-1402 City & State Coral Gables, FL Zip 33134 Country USA	
4. FEI Number 20-4806623		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		10222007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent GUTIERREZ, RAFAEL 1879 DAVIE BLVD FT LAUDERDALE, FL 33312		7. Name and Address of New Registered Agent Name JORGE BESH Street Address (P.O. Box Number is Not Acceptable) 10 ARAGON AVE. # LP-1402 City Coral Gables FL Zip Code 33134	
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 10-22-2007	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTIERREZ, MANUEL 1879 DAVIE BLVD FT LAUDERDALE, FL 33312 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tim RYAN, Pres. & Dir <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3333 RICE ST., Apt. 203 Miami, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTIERREZ, RAFAEL 1879 DAVIE BLVD FT LAUDERDALE, FL 33312 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-Pres & Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MARIA RIVERA 3333 RICE ST., # 301 Miami, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOZANO, CARLOS 1879 DAVIE BLVD FT LAUDERDALE, FL 33312 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. - TREAS. & DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Dedrick Rios 1107 Alhambra Circle Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input type="checkbox"/> Addition FRANK HERNANDEZ 3333 RICE ST., #202 Miami, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input type="checkbox"/> Addition BARBARA DUFFY 3333 RICE ST., #101 Miami, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300111557529 10/31/07--01054--010 ***70.00
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the recorder or trustee empowered 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.			
SIGNATURE: 		10-22-07 305-773-4266	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	
Vice-Pres.			