2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 15, 2007
Secretary of State

DOCUMENT# N06000005615

Entity Name: VICTORIA BREEZES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

370 MINORCA AVENUE, SUITE ONE
CORAL GABLES, FL 331344311

New Principal Place of Business:

10958 NW 62 TERRACE
DORAL, FL 33178

Current Mailing Address:

370 MINORCA AVENUE, SUITE ONE
CORAL GABLES, FL 331344311

New Mailing Address:

10958 NW 62 TERRACE
DORAL, FL 33178

FEI Number: 83-0498806 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

THOMPSON, JOHN M ESQ.
370 MINORCA AVENUE, SUITE ONE
CORAL GABLES, FL 331344311 US

Name and Address of New Registered Agent:

THOMPSON, JOHN M ESQ.
3081 SALZEDO STREET
305
CORAL GABLES, FL 33134 US

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: JOHN M. THOMSON 11/15/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: ANGLADE, CARLOS
Address: 10958 NW 62ND TERRACE
City-St-Zip: DORAL, FL 33178

Title: DP ( ) Delete
Name: THOMSON, JOHN M
Address: 370 MINORCA AVENUE, SUITE ONE
City-St-Zip: CORAL GABLES, FL 331344311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change ( ) Addition
Name: THOMSON, JOHN M
Address: 3081 SALZEDO STREET SUITE 305
City-St-Zip: CORAL GABLES, FL 33134

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: CARLOS ANGLADE DPST 11/15/2007
Electronic Signature of Signing Officer or Director Date