2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000007278

TI FILED
Jul 11, 2007
Secretary of State

Entity Name: AVENTURA MARINA TWO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

THE RELATED GROUP

315 S. BISCAYNE BLVD, 3RD FLOOR

MIAMI, FL 33131

FEIN & MELONI, ESQS.
900 SW 40TH AVENUE
PLANTATION, FL 33317

Current Mailing Address: New Mailing Address:

THE RELATED GROUP
315 S. BISCAYNE BLVD, 3RD FLOOR
MIAMI, FL 33131

FEIN & MELONI, ESQS.
900 SW 40TH AVENUE
PLANTATION, FL 33317

FEI Number: 20-5194151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC.

11380 PROSPERITY FARMS ROAD #221E

PALM BEACH GARDENS, FL 33410 US

MELONI, EDOARDO ESQ.
900 SW 40TH AVENUE
PLANTATION, FL 33317 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: EDOARDO MELONI 07/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: DP (X) Change () Addition

Name: FIGUEROA, SONIA Name: LUMER, GUSTAVO
Address: 315 S. BISCAYNE BLVD, 3RD FLOOR Address: 900 SW 40TH AVENUE

City-St-Zip: MIAMI, FL 33131 City-St-Zip: PLANTATION, FL 33317

Title: DV () Delete Title: DV (X) Change () Addition Name: MATHIEU, ANDREA Name: SILVERSMITH, LILA

Address: 315 S. BISCAYNE BLVD, 3RD FLOOR Address: 900 SW 40TH AVENUE City-St-Zip: MIAMI, FL 33131 City-St-Zip: PLANTATION, FL 33317

Title: DST () Delete Title: DST (X) Change () Addition

 Name:
 GONZALEZ, SUSAN
 Name:
 MALDONADO, RAMSES

 Address:
 315 S. BISCAYNE BLVD, 3RD FLOOR
 Address:
 900 SW 40TH AVENUE

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 PLANTATION, FL 33317

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: GUSTAVO LUMER DP 07/11/2007