2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000008386

FILED Nov 13, 2009 Secretary of State

Entity Name: VARADERO EN LA PEQUENA HAVANA CONDOMINIUM ASSOCIATION INC. **Current Principal Place of Business: New Principal Place of Business:** 450 SOUTH WEST 3RD STREET MIAMI, FL 33130 **Current Mailing Address: New Mailing Address:** 7700 NORTH KENDALL DRIVE 7700 NORTH KENDALL DRIVE SUITE PH-2 SUITE 802 MIAMI, FL 33156 MIAMI, FL 33156 FEI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent: CADICORP MANAGEMENT GROUP 7700 NORTH KENDALL DRIVE PH-2 SUITE 802 MIAMI, FL 33156 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: CADICORP MANAGEMENT Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VASQUEZ, GUILLERMO Name: Name: 450 SOUTH WEST 3RD STREET Address: Address: City-St-Zip: MIAMI, FL 33130 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: BRENNAN, JASON I Name: Address: 450 SOUTH WEST 3RD STREET Address: City-St-Zip: MIAMI, FL 33130 City-St-Zip: Title: () Delete Title: () Change () Addition FERNANDEZ, ARISTIDES Name: Name: 340 SOUTH WEST 3RD STREET Address: Address: City-St-Zip: MIAMI, FL 33130 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: GUILLERMO VASQUEZ PD 11/13/2009