2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 15, 2009
Secretary of State

DOCUMENT# N06000008823

Entity Name: COMAR ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10008 W FLAGLER STREET #287
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

10008 W FLAGLER STREET #287
MIAMI, FL 33174

New Mailing Address:

FEI Number: 20-8919254 **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:

GURIAN, JORGE
2600 DOUGLAS ROAD
SUITE 1100
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GURIAN, JORGE
2665 SOUTH BAYSHORE DRIVE
SUITE 906
COCONUT GROVE, FL 33133 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: JORGE GURIAN 10/15/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CORUJO, RODOLFO
Address: 10008 W FLAGLER STREET #287
City-St-Zip: MIAMI, FL 33174

Title: VPD ( ) Delete
Name: PADRON, MARIO
Address: 5819 W 26 AVENUE
City-St-Zip: HIALEAH, FL 33016

Title: STD ( ) Delete
Name: PEREZ, MARIA E
Address: 8370 NW 8 ST #6
City-St-Zip: MIAMI, FL 33126

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:

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: RODOLFO CORUJO PD 10/15/2009
Electronic Signature of Signing Officer or Director Date