2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N06000009048

Entity Name: BISCAYNE BEACH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2037 NW 27 AVENUE
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

2037 NW 27 AVENUE
MIAMI, FL 33142

New Mailing Address:

FEI Number: 72-1620811 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNANDEZ, LEONOR
2037 NW 27 AVENUE
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: HERNANDEZ, LEONOR
Address: 8230 HAWTHORNE AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

Title: DVP ( ) Delete
Name: SAMPERIO, AMAYA
Address: 7724 HAWTHORNE AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

Title: DVP ( ) Delete
Name: ARTAGAVEYTIA, ALBERTO
Address: 8140 HAWTHORNE AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

Title: DT ( ) Delete
Name: KOLLER, MARIA
Address: 7700 HAWTHORNE AVENUE
City-St-Zip: MIAMI, FL 33141 US

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:

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: LEONOR HERNANDEZ P 04/30/2009

Electronic Signature of Signing Officer or Director — Date