2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000009633

City-St-Zip:

SUNNY ISLES, FL 33160

TI FILED

May 01, 2009

Secretary of State

Entity Name: OCEAN FOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 17201 COLLINS AVENUE SUNNY ISLES, FL 33160 **Current Mailing Address: New Mailing Address:** 17201 COLLINS AVENUE SUNNY ISLES, FL 33160 FEI Number: 20-5569059 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: ROGEL, DAVID H ESQ RONES, VICTOR K ESQ BECKER & POLIAKOFF, P.A. 16105 N.E. 18TH AVENUE 121 ALHAMBRA PLAZA, 10TH FLOOR NORTH MIAMI BEACH, FL 33162 US 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: VICTOR K. RONES, ESQUIRE 05/01/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TORRES, OSCAR Name: Name: 17201 COLLINS AVENUE, UNIT 1504 Address: Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: Title: () Delete Title: () Change () Addition ROSENSTEIN, NICK Name: Name: Address: 17201 COLLINS AVENUE, UNIT 4105 Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: Title: () Delete Title: () Change () Addition LEVITAN, IOSIF Name: Name: 17201 COLLINS AVENUE, UNIT 3208 Address: Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: () Delete Title: Title: () Change () Addition TANG, RUDY Name: Name: 17201 COLLINS AVENUE, UNIT 3004 Address: Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: Title: Title: () Delete () Change () Addition WISH, VALENTINA Name: Name: 17201 COLLINS AVENUE, UNIT 3303 Address: Address:

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.

City-St-Zip:

SIGNATURE: RUDY TANG S 05/01/2009