## 2007 NOT-FOR-PROTIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000011291  1. Entity Name TORINO S.W. CONDOMINIUM ASSOCIATION, INC.						01713	FILED ECRETARY OF STATE SION OF CORPORATE  JUL 20 PM II: 0	UNS	, 1	
Principal Plac 80 S.W, 8TH SUITE 1870 MIAMI, FL 3	STREET	S	Mailing Address 80 S.W. 8TH STREET SUITE 1870 MIAMI, FL 33130			NJ-7.	10L 20 PM 11: 0 16-07 9	0180	614 4034	
2. Principal F	lace of Busin	ess - No P.O. Box #	3. Mailing Addre	ss			<u> </u>			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04162007	Chg-NP CR2E(	37 (12/06)	l •	
City & State			City & State			4. FEI Number	866128	<u> </u>	Applied For Not Applicable	
Zip	Country		Zip		Country		f Status Desired	\$8.75 Ac	dditional	
	6. Name	and Address of Current	Registered Agent			7. Name and A	ddress of New Registered			
JEFFREY R. MARGOLIS, P.A.										
C/O DUANE MORRIS LLP 200 SOUTH BISCAYNE BOULEVARD, STE. 3400 MIAMI, FL 33131						Street Address (P.O. Box Number is Not Acceptable)				
					City		Fi	Zip Co	de	
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE  Signature, typed or printed name of registered agent and lidle if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
Filing Fee is \$61.25 9. Election C Due by May 1, 2007 Trust Fund						\$5.00 May Be Added to Fees	Make chec Florida Depa	rtment of S	tate.	
10.	OFFICERS AND DIRECTORS				1.	ADDITIONS/CHAN	IGES TO OFFICERS AND D			
TITLE NAME	PD KAHN, S. I	LAUREN	☐ De		TILE JAME			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP					TREET ADDRESS					
TITLE	23 2500				ITLE			Change	Addition	
NAME STREET ADDRESS	SERRATS		70	•	TREET LODGES					
CITY-ST-ZIP	MIAMI, FL	TH STREET, SUITE 18 33130	70		TREET ADDRESS					
TITLE	STD Delete TI				TLE			☐ Change	Addition	
NAME	KOVIN, JOEL NAM							_ •	_	
STREET ADDRESS CITY-ST-ZIP										
TITLE			Del	ete Ti	TLE .	· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition	
NAME					AME					
STREET ADORESS CITY-ST-ZIP					TREET ADDRESS					
TITLE	<del></del>		Dele		TLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	
NAME					AME			•		
STREET ADDRESS   CITY-ST-ZIP					TREET ADORESS					
TITLE			Dek		TLE			Change	Addition	
NAME			- July	N	ME					
STREET ADDRESS   CITY-ST-ZIP				2	TY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Date Deviate Phone 5										
3. Lauren Kahn										