

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012786

FILED
Feb 26, 2009
Secretary of State

Entity Name: THE EDGES AT 4TH ST. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1040 S.W. 4TH STREET
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

814 PONCE DE LEON BLVD
#400
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-8421725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HABER, ROBERT M
520 BRICKELL AVENUE
SUITE O-305
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

HABER, ROBERT M
1000 BRICKELL AVENUE
215
MIAMI, FL 33131 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:

02/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RUIZ, ZULLY
Address: 814 PONCE DE LEON BLVD #400
City-St-Zip: CORAL GABLES, FL 33134

Title: VD () Delete
Name: BUDEJEN, DANIA
Address: 814 PONCE DE LEON BLVD #400
City-St-Zip: CORAL GABLES, FL 33134

Title: STD (X) Delete
Name: GARCIA, ALINA
Address: 8440 GRAND CANAL DR.
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: GARCIA, ALINA
Address: 8440 GRAND CANAL DRIVE
City-St-Zip: MIAMI, FL 33174

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: ZULLY RUIZ

PD

02/26/2009

Electronic Signature of Signing Officer or Director

Date