2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013087

FILED Apr 24, 2008 Secretary of State

Entity Name: BELLA VISTA PALACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1638 SW 3 STREET 1638 SW 3 STREET 1638 SW 3 STREET 11

MIAMI, FL 33135

Current Mailing Address: New Mailing Address:

1638 SW 3 STREET 1638 SW 3 STREET 1638 SW 3 STREET 11

MIAMI, FL 33135

FEI Number: 39-2057463 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:

MONTES, ANTONIO
1638 SW 3 STREET
MIAMI, FL 33135 US

MONTES, ANTONIO
1638 SW 3 STREET
11
11

MIAMI, FL 33135 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.

in the otate of Florida.

CARDENAS, NICOLAS

1638 SW 3 STREET

MONTES, ANTONIO

1638 SW 3 STREET

HENRIQUEZ, DANTON

MONTES, ALEXANDER

1638 SW 3 STREET

MIAMI, FL 33135

1638 SW 3 STREET

MIAMI, FL 33135

MIAMI, FL 33135

MIAMI, FL 33135

DS

DVP

Name:

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name: Address:

City-St-Zip:

Address: City-St-Zip: () Delete

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SIGNATURE: ANTONIO MONTES 04/24/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

Name: CARDENAS, NICOLAS
Address: 1638 SW 3 STREET # 11
City-St-Zip: MIAMI, FL 33135

Title: DS (X) Change () Addition

Name: MONTES, ANTONIO
Address: 1638 SW 3 STREET # 11
City-St-Zip: MIAMI, FL 33135

Title: DVP (X) Change () Addition

Name: HENRIQUEZ, DANTON
Address: 1638 SW 3 STREET # 11
City-St-Zip: MIAMI, FL 33135

Title: T (X) Change () Addition

Name: MONTES, ALEXANDER Address: 1638 SW 3 STREET # 11 City-St-Zip: MIAMI, FL 33135

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: ANTONIO MONTES DS 04/24/2008