2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001098

FILED Apr 28, 2008 Secretary of State

Entity Name: IMPERIAL TOWER II CONDOMINIUM ASSOCIATION, INC.

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

216 SW 12TH AVENUE MIAMI, FL 33130

Current Mailing Address: New Mailing Address:

216 SW 12TH AVENUE PO BOX 351210 MIAMI, FL 33130 MIAMI, FL 33135

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEMUN, ABRAHAM
216 SW 12TH AVENUE
MIAMI, FL 33130 US
FIGUEROA, JUAN A CPA
1428 BRICKELL AVE
SUITE 206
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: JUAN A FIGUEROA 04/28/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD () Delete Title: MGR (X) Change () Addition

 Name:
 MEMUN, ABRAHAM
 Name:
 MEMUN, ABRAHAM

 Address:
 216 SW 12TH AVENUE
 Address:
 PO BOX 351210

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:
 MIAMI, FL 33135

Title: VPSD () Delete Title: MGR (X) Change () Addition Name: ALFIE, MOISES Name: SALAME, SIMON

 Name:
 ALFIE, MOISES
 Name:
 SALAME, SIMON

 Address:
 216 SW 12TH AVENUE
 Address:
 PO BOX 351210

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:
 MIAMI, FL 33135

 Name:
 SALAME, SIMON
 Name:

 Address:
 216 SW 12TH AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33130
 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: ABRAHAM MEMUN MGR 04/28/2008