## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000004252

FILED Apr 22, 2009 Secretary of State

Entity Name: ONE AVENTURA EXECUTIVE CENTER CONDOMINIUM ASSOCIATION, INC.

Current P	rincipal Place	of Business:	New Princip	New Principal Place of Business:		
17850 W DIXIE HIGHWAY #2B			918 OCEAN 207	918 OCEAN DRIVE		
	11AMI, FL 3316	0	:	MIAMI BEACH, FL 33139		
Current N	lailing Addres	ss:	New Mailing	New Mailing Address:		
17850 W DIXIE HIGHWAY				918 OCEAN DRIVE		
#2B NORTH MIAMI, FL 33160			207 MIAMI BEAC	MIAMI BEACH, FL 33139		
FEI Number	: 20-8970908	FEI Number Applied For ( )	FEI Number Not Applica	able ( ) Certificate of Status Desire	∍d ( )	
Name and Address of Current Registered Agent:			Name and A	Name and Address of New Registered Agent:		
TURNBEF 2875 N.E.	DANIEL J ESC RRY PLAZA, S 191ST STREE RA, FL 33180	UITE 801 ET	536 BILTMOF	CUEVAS & ORTIZ, P.A. 536 BILTMORE WAY CORAL GABLES, FL 33134 US		
	e named entity: e of Florida.	submits this statement for the	purpose of changing its	registered office or registered agent,	or both,	
SIGNATURE: ANDREW CUEVAS				04/22/2009		
	Electror	nic Signature of Registered Ag	ent	Date		
OFFICER	S AND DIREC	TORS:	ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WEINTRAUB, A	HIGHWAY, #2B	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	BORODOWSK	HIGHWAY, #2B	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: Citv-St-Zip:	LEVY-HARA, F	HIGHWAY, #2B	Title: Name: Address: City-St-Zip:	() Change () Addition		

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 WEINTRAUB PD 04/22/2009