

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000008301

FILED
Dec 12, 2009
Secretary of State

Entity Name: BISCAYNE CENTRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11900 BISCAYNE BLVD.,
SUITE 620
MIAMI, FL 33181

New Principal Place of Business:

11900 BISCAYNE BLVD.,
SUITE 509
MIAMI, FL 33181

Current Mailing Address:

11900 BISCAYNE BLVD.,
SUITE 620
MIAMI, FL 33181

New Mailing Address:

1125 WASHINGTON AVENUE
MIAMI BEACH, FL 33139

FEI Number: 26-0813387 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STREAMLINE PROPERTIES, INC.
1125 WASHINGTON AVE.
MIAMI BCH, FL 33139 US

Name and Address of New Registered Agent:

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: SAUL GROSS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROMERO, EDUARDO
Address: 1680 MICHIGAN AVE., SUITE 730
City-St-Zip: MIAMI BCH, FL 33139

Title: VDT () Delete
Name: COVARRUBIAS, EDUARDO
Address: 1680 MICHIGAN AVE., SUITE 730
City-St-Zip: MIAMI BCH, FL 33139

Title: SD () Delete
Name: GOMEZ, RODRIGO
Address: 1680 MICHIGAN AVE., SUITE 730
City-St-Zip: MIAMI BCH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: COHEN, MELANIE
Address: 11900 BISCAYNE BOULEVARD, SUITE 616
City-St-Zip: MIAMI, FL 33181

Title: AS () Change (X) Addition
Name: GROSS, SAUL
Address: 1125 WASHINGTON AVE
City-St-Zip: MIAMI BEACH, FL 33139

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: SAUL GROSS

Electronic Signature of Signing Officer or Director

AS

12/12/2009

Date