

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 30, 2009
Secretary of State

DOCUMENT# N07000012259

Entity Name: 3036 MATILDA STREET CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3122 VIRGINIA STREET
MIAMI, FL 33133**New Principal Place of Business:**3038 MATILDA STREET
MIAMI, FL 33133**Current Mailing Address:**3122 VIRGINIA STREET
MIAMI, FL 33133**New Mailing Address:**3038 MATILDA STREET
MIAMI, FL 33133**FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DIAZ, RENE
3122 VIRGINIA STREET
MIAMI, FL 33133 US**Name and Address of New Registered Agent:**DIAZ, NELSON
3038 MATILDA STREET
MIAMI, FL 33133 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: NELSON DIAZ

09/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: DIAZ, RENE
Address: 3122 VIRGINIA STREET
City-St-Zip: MIAMI, FL 33133Title: VP () Delete
Name: RODRIGUEZ, FERMIN
Address: 440 EAST 53 STREET
City-St-Zip: HIALEAH, FL 33013Title: T (X) Delete
Name: GARCIA, PEDRO
Address: 6885 NORTH WATERWAY DRIVE
City-St-Zip: MIAMI, FL 33155**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: DIAZ, NELSON
Address: 3038 MATILDA STREET
City-St-Zip: MIAMI, FL 33133Title: VP (X) Change () Addition
Name: DIAZ ALDORASI, TONY
Address: 3036 MATILDA STREET
City-St-Zip: MIAMI, FL 33133Title: () 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: NELSON DIAZ

P

09/30/2009

Electronic Signature of Signing Officer or Director

Date