2308 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 14, 2008 8:00 am Secretary of State DOCUMENT # N07654 1. Entity Name NEW WORLD II CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1470 NW 107TH AVE. 1470 NW 107TH AVE. MIAMI FL 33172 MIAMI FL 33172 2. Principal Place of Business - No P.O. Box # Mailing Address 22 8055 WBOV Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State 4. FEI Number Applied For 59-2530211 Not Applicable Zic \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent DIAZ. JOSE E PD Street Address (P.O. Box Number is No Acceptable) 1470 NW 107TH AVE. MIAMI FL 33172 8. The above named ent mits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of SIGNATURE printed name of registered agent and title if applicable (NOTE: Registored Agent signature regulared when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delate TITLE DIAZ, JOSE E PD NAME NAME 1470 K NW 107TH AVE. STREET ADDRESS STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP CITY-ST-ZiP ☐ Delete TIFLE Change Addition SGRERA, PEDRO E VP NAME 1460 M NW 107TH AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP CITY-ST-ZIP SECR TITLE ☐ Delete TITLE Change ☐ Addition NAME AGUIAR, TOMAS J SECR NAME STREET ADDRESS 1460 G NW 107 AV STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP CITY-ST-ZIP TRE TITLE Delete TITLE ☐ Change ☐ Addition VALDES, NOELIA E TRE NAME NAME STREET ADDRESS 1460-Q NORTHWEST 107 AVENUE STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MARRERO, ENILDO VS NAME NAME 1470 F NW 107TH AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete TĮTLE ☐ Change ☐ Addition NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 expowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with all other like empower or.

STREET ADURESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED