2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 26, 2007 DOCUMENT# N12103 Secretary of State

Entity Name: SOUTHVIEW AT AVENTURA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3350/3440 NE 192ND STREET AVENTURA, FL 33180 **Current Mailing Address: New Mailing Address:** 2950 N 28TH TERR HOLLYWOOD, FL 33020 FEI Number: 59-2805103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MARS, GARY BROUGH, DAVID 150 FLAGLER STE 270 1900 NORTH COMMERCE PKWY MIAMI, FL 33130 WESTON, FL 33326 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: DAVID BROUGH 07/26/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOYCE, CHRISTOPHER Name: Name: 3440 19 2ND ST A-2L Address: Address: City-St-Zip: MIAMI, FL 33180 City-St-Zip: Title: Title: () Delete () Change () Addition Name: WINKLER, ALEXANDER Name: Address: 3440 NE 192ND STREET. #A-2E Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition MENDOZA, GENOVEVA Name: Name: Address: 3350 NE 192ND STREET, (B-4B) Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ANDRIVLLI, JOHN Name: Address: 3350 NE 192ND STREET #B-2C Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition DELPINO, ROBERT Name: Name: 3440 NE 192ND STREET #A-5H Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition TORRES, JOHN Name: Name: Address: 3440 NE 192ND STREET, (A-4N) Address:

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.

City-St-Zip:

SIGNATURE: CHRIS JOYCE Ρ 07/26/2007

AVENTURA, FL 33180

City-St-Zip: