
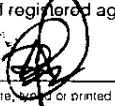
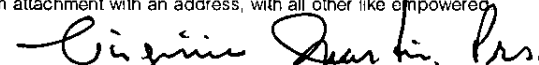


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90075 047 ****61.25

DOCUMENT # N15827 1. Entity Name KENDALL PARK COMMERCIAL CONDOMINIUM TWO ASSOCIATION, INC.					
Principal Place of Business 12350 SW 132 CT # 211 MIAMI FL 33283			Mailing Address P.O. BOX 831741 MIAMI FL 33283		
2. Principal Place of Business - No P.O. Box # 12217 SW 132 CT			3. Mailing Address 12217 SW 132 CT.		
Suite, Apt. #, etc. 			Suite, Apt. #, etc. 		
City & State Miami, FL			City & State MIAMI, FL.		
Zip 33186		Country USA		4. FEI Number 59-2776859	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent OCEAN MANAGEMENT INVESTMENT CORP C/O EDGARD FONSECA 12350 SW 132CT, # 211 MIAMI FL 33283			7. Name and Address of New Registered Agent Name Richard A. Chapman Street Address (P.O. Box Number is Not Acceptable) 12213 SW 132 CT. City MIAMI FL Zip Code 33186		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Richard A. Chapman 2/14/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small> <small>DATE</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PEDROSO, GERARDO 12225 SW 132ND CT MIAMI FL 33186	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MARTIN, VIRGINIA 12217 SW 132ND CT MIAMI FL 33186	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BRANOFF, EDWARD 13000 SW 120 STREET MIAMI FL 33186	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
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 empowered 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 an address, with all other like empowered.					
SIGNATURE:  2/14/07 305 233-3008 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date Daytime Phone #</small>					



1st MOORE CR2E037 (10/06)