

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 19, 2009  
Secretary of State**

DOCUMENT# N33788

**Entity Name:** TAMAIR COMMERCIAL CENTER SECTION II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MARINSA MIAMI CORP  
BAY # 4  
MIAMI, FL 33186 US

**New Principal Place of Business:**

**New Mailing Address:**

C/O MARINSA MIAMI CORP  
BAY # 4  
MIAMI, FL 33186 US

**Current Mailing Address:**

14250 SW 136 ST  
BAY # 4  
MIAMI, FL 33186 US

**FEI Number:** 65-0196600      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALCHLI, UELI  
14250 SW 136 ST  
MIAMI, FL 33186 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GARCIA, MIGUEL  
Address: 11898 SW 74 TERR  
City-St-Zip: MIAMI, FL 33183

Title: D ( ) Delete  
Name: DICK, PHILIP A  
Address: 1401 CORUNA AVENUE  
City-St-Zip: CORAL GABLES, FL 33156

Title: STD ( ) Delete  
Name: WALCHLI, UELI  
Address: 10730 S.W. 148 AV. DR.  
City-St-Zip: MIAMI, FL 33196

Title: VD ( ) Delete  
Name: SPIVAK, MICHAEL B  
Address: 9531 EAST CALUSA CLUB DR  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: ( ) 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: WALCHLI, UELI

STD

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date