N48371

LAW OFFICES OF STEVEN A. FEIN, P.A.

930 South State Road 7 Plantation, Florida 33317 (954) 791-4770 Fax (954) 321-8481

December 8, 1998

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Doral House Condominium Association, Inc.

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above referenced corporation.

In addition, I am enclosing the required filing fee of \$35.00.

Very truly yours,

Steven A. Fein

SAF/jb

enclosure

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation is: Doral House Condominium Association, Inc.
2. The mailing address of the corporation is: 700 N.W. 107th Avenue, Miami, FL 33172
3. Date of incorporation/qualification: April 15, 1992 Document number: N48371
4. The name and address of the current registered agent and office:
Edoardo Meloni
Hyman & Kaplan, P.A.
150 W. Flagler Street, 27th Floor, Miami, FL 33+30 55. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Steven A. Fein
930 South State Road 7
Plantation, FL 33317 The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board) (Date)
Obel Torres Assident (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

* * * FILING FEE: \$35.00 * * *