2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 12, 2009
Secretary of State

DOCUMENT# N50471

Entity Name: RO-MONT SOUTH CONDOMINIUM "P," INC.

Current Principal Place of Business:

75 NE 202 TERR
MIAMI GARDENS, FL 33179

New Principal Place of Business:

Current Mailing Address:

20314 NE 2ND AVENUE
MIAM GARDENS, FL 33179

New Mailing Address:

FEI Number: 65-0409565 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KELLY, ROBERT ESQ
2514 HOLLYWOOD BOULEVARD
SUITE 307
HOLLYWOOD, FL 33020 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: CARLOS MENDOZA

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	JENKINS, BRIGITTE MS.	
Address:	75 NE 202 TERRACE	
City-St-Zip:	MIAMI GARDENS, FL 33179	
Title:	VP	( ) Delete
Name:	HENDERSON, CYNTHERIA	
Address:	75 NE 202 TERRACE	
City-St-Zip:	MIAMI GARDENS, FL 33179	
Title:	SEC	( ) Delete
Name:	DENNIS, NORMA MS	
Address:	75 NE 202 TERRACE	
City-St-Zip:	MIAMI GARDENS, FL 33179	
Title:	TRS	( ) Delete
Name:	APONTE, CARMEN MS.	
Address:	75 NE 202 TERRACE	
City-St-Zip:	MIAMI GARDENS, FL 33179	
Title:	TRS2	( ) Delete
Name:	LOWE, MARGARET MS	
Address:	75 NE 202 TERRACE	
City-St-Zip:	MIAMI GARDENS, FL 33179	
Title:	DIR	( ) Delete
Name:	WILLIAMS, OLA MS	
Address:	75 NE 202 TERRACE	
City-St-Zip:	MIAMI GARDENS, FL 33179	

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:	
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: CARLOS MENDOZA MAN 10/12/2009

Electronic Signature of Signing Officer or Director — Date