

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000142

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** MARINA REAL CONDOMINIUM NO. 1 ASSOCIATION, INC.

**Current Principal Place of Business:**

2510 N.W. 97 AVENUE, STE 200  
DORAL, FL 33172 US

**New Principal Place of Business:**

**Current Mailing Address:**

2510 N.W. 97 AVENUE, STE 200  
DORAL, FL 33172 US

**New Mailing Address:**

**FEI Number:** 65-0324597

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PIQUE, SILVIA  
EXCEL MANAGEMENT  
2510 NW 97 AVE 200  
MIAMI, FL 33172 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: P/D ( ) Delete  
Name: ALVAREZ, HUMBERTO  
Address: 1178 NW 123 PLACE  
City-St-Zip: MIAMI, FL 33182

Title: TS ( ) Delete  
Name: EGREDO, RAFAEL  
Address: 12884 NW 11 AVE  
City-St-Zip: MIAMI, FL 33182

Title: S ( ) Delete  
Name: LIBREROS, JOHN  
Address: 12370 NW 11 AVE  
City-St-Zip: MIAMI, FL 33182

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

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

Title: S (X) Change ( ) Addition  
Name: SEGREDO, RAFAEL  
Address: 12884 NW 11 AVE  
City-St-Zip: MIAMI, FL 33182

Title: T (X) Change ( ) Addition  
Name: GONZALES, RAUL V  
Address: 12346 NW 11 AVE  
City-St-Zip: MIAMI, FL 33182

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: HUMBERTO ALVAREZ

P

04/28/2009

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

\_\_\_\_\_  
Date