

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 20, 2008
Secretary of State

DOCUMENT# N93000001802

Entity Name: DECOLUX CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**826 EUCLID AVENUE
MIAMI BEACH, FL 33139 US**New Principal Place of Business:****Current Mailing Address:**C/O BLUE SKY MIAMI
1680 MICHIGAN AVENUE # 908
MIAMI BEACH, FL 33139**New Mailing Address:****FEI Number:** 65-0415481**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GOMEZ, MICHAEL
1930 TYLER STREET
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: MIRANDA, SILVIO
Address: 830 EUCLIO AVE, #2
City-St-Zip: MIAMI BEACH, FL 33139**Title:** D () Delete
Name: JOHM, JOHN
Address: EUCLID AVE,
City-St-Zip: MIAMI BEACH, FL 33139**Title:** D () Delete
Name: JEFF, JEFF
Address: EUCLID AVENUE
City-St-Zip: MIAMI BEACH, FL 33139**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** S (X) Change () Addition
Name: MIRANDA, SILVIO
Address: 2131 BIARRITZ DR
City-St-Zip: MIAMI BEACH, FL 33141**Title:** P (X) Change () Addition
Name: WASTON, JOHN
Address: 830 EUCLID AVE, APT 1
City-St-Zip: MIAMI BEACH, FL 33139**Title:** T (X) Change () Addition
Name: DONNELLY, JAMES
Address: 826 EUCLID AVE, APT 12
City-St-Zip: MIAMI BEACH, FL 33139**Title:** MGR () Change (X) Addition
Name: SHEINER, ROBERT MAXWELL
Address: 1680 MICHIGAN AVE, STE 908
City-St-Zip: MIAMI BEACH, FL 33139

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: R MAXWELL SHEINER

MGR

06/20/2008

Electronic Signature of Signing Officer or Director

Date