## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001729

FILED Feb 04, 2007 Secretary of State

Entity Name: THE ST. GEORGE (MIAMI BEACH) CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
605 EUCLIE	O AVE.					
#605 MIAMI BEA	CH, FL 33139	9				
Current Mailing Address:			New Maili	New Mailing Address:		
741 PETUN PLANTATIO	IIA DRIVE DN, FL 33317	,				
FEI Number:	59-1880345	FEI Number Applied For()	FEI Number Not Appl	icable ( ) Certificate of Stat	tus Desired()	
Name and Address of Current Registered Agent: N				Name and Address of New Registered Agent:		
741 PETUN	VY & ASSOCI IIA DRIVE DN, FL 33317	,				
The above r in the State		submits this statement for the	purpose of changing it	ts registered office or registere	d agent, or both,	
SIGNATUR	E:					
	Electron	nic Signature of Registered Ag	ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP () ADDARIO, MAR 3905 ALTON RO MIAMI BEACH,	OAD	Title: Name: Address: City-St-Zip:	()Change ()Additio	on	
Title: Name: Address: City-St-Zip:	D () CRUZ, PABLO 151 S.W. 23RD MIAMI, FL 331		Title: Name: Address: City-St-Zip:	()Change ()Additio	on	
Title: Name: Address: City-St-Zip:	TR () RIBEIRO, PEDI 605 EUCLID AV MIAMI BEACH,	/ENUE	Title: Name: Address: City-St-Zip:	TR (X) Change ( ) Addition CHURACK, DEAN 605 EUCLID AVENUE MIAMI BEACH, FL 33139	on	
Title: Name: Address: City-St-Zip:	P () RIBEIRO, PEDI 605 EUCLID AV MIAMI BEACH,	/ENUE	Title: Name: Address: City-St-Zip:	()Change ()Additic	on	

I hereby certify that the information supplied with this filing does not qualify for the 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: PEDRO RIBEIRO PD 02/04/2007