

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90069 041 ****61.25

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1. Entity Name
BARINZ CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
1188 MARSEILLE DRIVE
APT 1
MIAMI BEACH, FL 33141

Mailing Address
1188 MARSEILLE DRIVE
APT 1
MIAMI BEACH, FL 33141 US



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02212008 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
65-0626857

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROBLEJO, JUAN
1188 MARSEILLE DRIVE
APT #2
MIAMI BEACH, FL 33141

7. Name and Address of New Registered Agent

Name **RAFAEL DELANCE**

Street Address (P.O. Box Number is Not Acceptable)
1188 MARSEILLE DRIVE

APT #1

City **MIAMI BEACH** FL Zip Code **33141**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **RAFAEL DELANCE** (NOTE: Registered Agent signature required when reinstating)

DATE **2/3/08**

6125

Filing Fee is **\$61.25** Due by **May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	ROBLEJO, JUAN	% 1188 MARSEILLE DRIVE APT # 2	MIAMI, FL 33141	<input type="checkbox"/>
VD	FERNANDINI, MIGUEL C	1188 MARSEILLE DRIVE APT #4	MIAMI BEACH, FL 33141	<input type="checkbox"/>
SD	DELANCE, RAFAEL	% 1188 MARSEILLE DRIVE APT # 1	MIAMI BEACH, FL 33141	<input type="checkbox"/>
TD	ZEVALLOS, CARLOS D	% 1188 MARSEILLE DRIVE APT # 3	MIAMI BEACH, FL 33141	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	RAFAEL DELANCE	1188 MARSEILLE DR APT #1	MIAMI BEACH FL 33141	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	JUAN Roblejo	1188 MARSEILLE DR. APT #2	MIAMI BEACH, FL 33141	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **RAFAEL DELANCE**

DATE: **2/23/2008**

DAYTIME PHONE: **(305) 865-7209**

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