

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001818

FILED
Apr 26, 2008
Secretary of State

Entity Name: THE OAKVIEW CONDOMINIUM ASSOCIATION NO. 4, INC.

Current Principal Place of Business:

1350 SW 122 AVE
3RD. FLOOR
MIAMI, FL 33184 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 144636
CORAL GABLES, FL 33114

New Mailing Address:

C/O S & S GEN. SERVICES INC.
P.O. BOX 144636
CORAL GABLES, FL 33114

FEI Number: 59-1629756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTOS, SOLANGEE T CAM
1350 SW 122 AVE
3RD. FLOOR
MIAMI, FL 33184 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: URDANAVIA, SALVADOR
Address: 9179 FONTAINEBLEAU BLVD. #10
City-St-Zip: MIAMI, FL 33172 US

Title: DD () Delete
Name: MARTINEZ, MANUEL R
Address: 91181 FONTAINEBLEAU BLVD. #4
City-St-Zip: MIAMI, FL 33172 US

Title: DD () Delete
Name: WARD, EDGARD
Address: 9199 FONTAINEBLEAU BLVD. #8
City-St-Zip: MIAMI, FL 33172 US

Title: DD () Delete
Name: MARIN-LUGO, RUTH
Address: 9181 FONTAINEBLEAU BLVD. #6
City-St-Zip: MIAMI, FL 33172 US

Title: DD () Delete
Name: AGYAGASY, STEVE
Address: 9173 FONTAINEBLEAU BLVD. #8
City-St-Zip: MIAMI, FL 33172

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:

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: SALVADOR URDANAVIA

P

04/26/2008

Electronic Signature of Signing Officer or Director

Date