

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000002039

FILED
Oct 10, 2008
Secretary of State

Entity Name: NEW WORLD CONDOMINIUM APARTMENTS II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

18851 NE 29TH AVE.
SUITE 700
AVENTURA, FL 33180 US

New Principal Place of Business:

2131 NW 139ST
SUITE 21
OPA-LOCKA, FL 33054 US

Current Mailing Address:

2131 NW 139TH STREET
UNIT 21
MIAMI, FL 33054 US

New Mailing Address:

2131 NW 139ST
SUITE 21
OPA-LOCKA, FL 33054 US

FEI Number: 65-0757962 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ASTOR MANAGEMENT SERVICES INC
2131 NW 139TH STREET
UNIT 21
MIAMI, FL 33054 US

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: CHRISTOPHER CAMPBELL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: WILLIAMS, ALVIN
Address: 301 NW 177 STREET #203
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: ROBINSON, CONGRIVE
Address: 301 NW 177 STREET #140
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: MAGWOOD, MICHELE
Address: 301 NW 177 STREET #108
City-St-Zip: MIAMI, FL 33169

Title: TD () Delete
Name: DUNCOMBE, BONEVIA
Address: 301 NW 177 STREET #102
City-St-Zip: MIAMI, FL 33169

Title: D (X) Delete
Name: CAMPBELL, CHRISTOPHER
Address: 301 NW 177TH STREET, 203
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: PEREZ, JORGE
Address: 301 NW 177TH STREET, 145
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, ALVIN
Address: 301 NW 177 STREET #203
City-St-Zip: MIAMI, FL 33169

Title: VP (X) Change () Addition
Name: ROBINSON, CONGRIVE
Address: 301 NW 177 STREET #140
City-St-Zip: MIAMI, FL 33169

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: ALVIN WILLIAMS

PD

10/10/2008

Electronic Signature of Signing Officer or Director

Date