## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000002311

FILED Apr 19, 2006 Secretary of State

Entity Name: THE JASMINE CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2615 COLLINS AVE. MIAMI BEACH, FL 33139 **Current Mailing Address: New Mailing Address:** 309-23RD STREET #300 MIAMI BEACH, FL 33139 FEI Number: 65-0777259 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REGATTA REAL ESTATE MGMT., INC. 309 23RD STREET STE. 300 MIAMI BEACH, FL 33139 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition BARROSO, JOSE BARROSO, JOSE Name: Name: 2615 COLLINS AVE Address: 2615 COLLINS AVE Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33140 Title: SD Title: (X) Change ( ) Addition ( ) Delete VERDE, FULVIA Name: VERDE, FULVIA Name: Address: 2615 COLLINS AVE Address: 2615 COLLINS AVE City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33140 Title: () Delete Title: (X) Change ( ) Addition GASTON, MARTA VALENCIA, JOHN Name: Name: 2615 COLLINS AVE Address: Address: 2615 COLLINS AVE City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33140 ( ) Change (X) Addition Title: Title: ( ) Delete Name: Name: SEGUROLA, JOSE Address: Address: 2615 COLLINS AVENUE City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33140 Title: () Delete Title: ( ) Change (X) Addition GARCIA, MARIA Name: Name: 2615 COLLINS AVENUE Address: Address: City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33140

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: JOSE BARROSO D 04/19/2006