2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001591

FILED Jan 04, 2005 Secretary of State

Entity Name: BYBLOS APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

128 SANTANDER AVE. 95 S SHORE DRIVE CORAL GABLES, FL 33134 MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

128 SANTANDER AVE. 95 S SHORE DR CORAL GABLES, FL 33134 2

MIAMI BEACH, FL 33141

FEI Number: 36-4561620 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:

ROMERO, NILTHE MOKHA, PAUL 128 SANTANDER AVE. 95 S SHORE DR CORAL GABLES, FL 33134 US 2

ORAL GABLES, FL 33134 US 2 MIAMI BEACH, FL 33141 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: PAUL MOKHA 01/04/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ROMERO, NILTHE
 Name:
 MOKHA, PAUL

 Address:
 128 SANTANDER AVE.
 Address:
 95 S SHORE DR UNIT 2

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: D () Delete Title: D (X) Change () Addition Name: HEVIA, FRANCISCO Name: CARABALLO, WENDY

 Name:
 Name:
 CARCABLED, WENDT

 Address:
 4207 N.W. 107 AVENUE
 Address:
 95 S SHORE DR UNIT 3

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ADAMS, RICARDO
 Name:
 VIGUES, MELISSA

 Address:
 2025 BRICKELL AVENUE, # 504
 Address:
 95 S SHORE DR UNIT 1

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:
 MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL MOKHA D 01/04/2005