2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 20, 2007
Secretary of State

DOCUMENT# P05000162503

Entity Name: HYPERION RESIDENCE MANAGEMENT, INC.

Current Principal Place of Business:

724 NE 2ND AVENUE
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

724 NE 2ND AVENUE
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 20-4256494 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARDO, GAINSBURG & BARROW, LLP
2 SOUTH BISCAYNE BLVD.
SUITE 2475
MIAMI, FLORIDA, FL 33131 US

Name and Address of New Registered Agent:

PARDO & GAINSBURG, LLP
2 SOUTH BISCAYNE BLVD.
SUITE 2475
MIAMI, FLORIDA, FL 33131 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: ELISSA GAINSBURG 09/20/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: VECSLER, ROBERT
Address: 724 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33132 US

Title: VD (X) Delete
Name: DEVITO, MAUREEN
Address: 724 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33132

Title: SD ( ) Delete
Name: KABA, CAROLYN
Address: 724 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33132

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT VECSLER PD 09/20/2007
Electronic Signature of Signing Officer or Director Date