2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162503

Entity Name: HYPERION RESIDENCE MANAGEMENT, INC.

FILED Sep 24, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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724 NE 2ND AVENUE 888 BISCAYNE BLVD. MIAMI, FL 33132 US 101

MIAMI, FL 33132

Current Mailing Address: New Mailing Address:

888 BISCAYNE BLVD. 724 NE 2ND AVENUE MIAMI, FL 33132

MIAMI, FL 33132 US

FEI Number: 20-4256494 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:

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:

Title:

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

VECSLER, ROBERT VECSLER, ROBERT Name: Name: 724 NE 2ND AVENUE Address: Address:

888 BISCAYNE BLVD., SUITE 101 City-St-Zip: MIAMI, FL 33132 US City-St-Zip: MIAMI, FL 33132 US

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

Name: KABA, CAROLYN Name: KABA, CAROLYN

724 NE 2ND AVENUE Address: 888 BISCAYNE BLVD., SUITE 101 Address:

MIAMI, FL 33132 MIAMI, FL 33132 City-St-Zip: 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 09/24/2008