


# 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 NOV -3 AM 9:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # 720563</b> 1. Entity Name MAISON GRANDE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 6039 COLLINS AVE. MIAMI BEACH, FL 33140			Mailing Address 6039 COLLINS AVE. MIAMI BEACH, FL 33140		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1377619	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  FRIEDMAN, DAVID 100 SE THIRD AVE. 11TH FLOOR FORT LAUDERDALE, FL 33394			7. Name and Address of New Registered Agent Name <u>Brough, Chadrow &amp; Levine, P.A.</u> Street Address (P.O. Box Number is Not Acceptable) <u>1900 North Commerce Parkway</u> City <u>Weston</u> FL Zip Code <u>33326</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>[Signature]</u> <span style="float: right;">10/28/08</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Amended AR is \$61.25</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		Make check payable to Florida Department of State
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENITO, URBANO 6039 COLLINS AVE MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Azriel Melchor 6039 Collins Avenue Miami Beach, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ARAGAN, HELENE 6039 COLLINS AVE MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Joanna Quintana 6039 Collins Avenue Miami Beach, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, TANIA 6039 COLLINS AVE MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Tania Martin 6039 Collins Avenue Miami Beach, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VILLUVERDE, CONSUELO F 6039 COLLINS AVE MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Marilyn Nadeich 6039 Collins Avenue Miami Beach, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NADRICH, MARILYN 6039 COLLINS AVE. MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Urbano Benito 6039 Collins Avenue Miami Beach, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Helene Aragon 6039 Collins Avenue Miami Beach, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>[Signature]</u>			Date <u>9/23/08</u>		Daytime Phone # <u>305-865-9247</u>



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