

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90499 003 *****5.00

DOCUMENT # 727315						Secretary of State	
1. Entity Name WESTLAND GARDENS EAST CONDOMINIUM ASSOCIATION, INC.						04-24-2006 90499 001 ****61.25 04-24-2006 90499 002 *****8.75 04-24-2006 90499 003 *****5.00	
Principal Place of Business 1855 WEST 62ND STREET APT. #328 HIALEAH FL 33012 US				Mailing Address PO BOX 126965 HIALEAH FL 33012 US			
2. Principal Place of Business				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 59-1610011				☒ Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent PASCUAL, MARIA DEL C 1855 W. 62 ST APT #328 HIALEAH FL 33012				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
FILE NOW: FEE IS \$61.25 Due By May 1, 2006				9. Election Campaign Financing Trust Fund Contribution. ☒		\$5.00 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 HERNANDEZ, SERGUEI 1855 WEST 62 ST #314 HIALEAH FL 33012 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, SERGUEI 1855 WEST 62 STREET #314 HIALEAH, FL. 33012 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PASCUAL, MARIA DEL C 1855 W. 62 ST. APT #328 HIALEAH FL 33012 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PASCUAL, MARIA DEL C 1855 WEST 62 STREET # 328 HIALEAH, FL. 33012 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUIZ, REYNALDO 1855 W 62ND ST. #209 HIALEAH FL 33012 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONTIEL, OSVALDO 1855 WEST 62 STREET # 308 HIALEAH, FL. 33012 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOSA, OTTO 16359 N.W. 87 PL MIAMI FL 33018 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCALLY MICHAEL 1855 WEST 62 STREET # 320 HIALEAH, FL. 33012 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RENE, REGUERA 1855 W. 62 ST., #104 HIALEAH FL 33012 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD REGUERA, RENE 1855 WEST 62 STREET # 104 HIALEAH, FL. 33012 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, JUAN E. 1855 WEST 62 STREET # 204 HIALEAH, FL. 33012 ☐ Change ☒ Addition		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: MICHAEL SCALLY- PRESIDENT

MARCH 06, 2006

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