

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90072 010 ****61.25



DOCUMENT # 754450
 1. Entity Name
INTERNATIONAL LAKE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
 12239 SW 24 TERRACE
 MIAMI, FL 33174 US

Mailing Address
 400 SW 107TH AVE., SUITE 312
 MIAMI, FL 33174 US

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country Zip Country

04122007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2430087

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DELGADO, EDUARDO
 12239 SW 24 TERRACE
 MIAMI, FL 33175

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 DATE **4/13/2007**

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	DELGADO, EDUARDO	
STREET ADDRESS	12239 SW 24 TERRACE	
CITY-ST-ZIP	MIAMI, FL 33175	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	HAM, EMILIO	
STREET ADDRESS	12221 SW 24TH TERR	
CITY-ST-ZIP	MIAMI, FL 33175	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BALDOQUIN, ENRIQUE	
STREET ADDRESS	12249 SW TERRACE	
CITY-ST-ZIP	MIAMI, FL 33175	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PICO, FRANCISCO	
STREET ADDRESS	12219 SW 24TH TERR	
CITY-ST-ZIP	MIAMI, FL 33175	
TITLE	D	<input type="checkbox"/> Delete
NAME	PEREZ, OLGA	
STREET ADDRESS	12211 SW 24TH TERR	
CITY-ST-ZIP	MIAMI, FL 33175	
TITLE	D	<input type="checkbox"/> Delete
NAME	AMAURIS SUAREZ	
STREET ADDRESS	2200 S.W. 122 Ave.	
CITY-ST-ZIP	Miami, FL 33175	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: **Eduardo Delgado** **4/13/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date **(305) 220-5684**
Daytime Phone #

