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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 757813

1. Corporation Name
EL LAGO N.W. 7TH CONDOMINIUM ASSOCIATION, INC.

229246 - 90045 - 30



Principal Place of Business %VILAR PROPERTY 305 ALCAZAR AVE. CORAL GABLES FL 33134	Mailing Address %VILAR PROPERTY 305 ALCAZAR AVE. CORAL GABLES FL 33134
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 04/30/1981
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 22-2368962
City & State 23	City & State 28	Applied For Not Applicable
Zip 24	Country 25	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
VILAR PROPERTY MANAGEMENT 305 ALCAZAR AVE. CORAL GABLES FL 33134				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D President
NAME	MARTINEZ, ALEXIS	1.2 NAME	MARTINEZ, Hugo
STREET ADDRESS	5505 NW 7TH STE. W 401	1.3 STREET ADDRESS	5505 NW 7th apt W-115
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL 33126
TITLE	PD	2.1 TITLE	D VicePre
NAME	RODRIGUEZ PEDRO	2.2 NAME	HERNANDEZ, REYNALDO
STREET ADDRESS	5501 NW 7 ST, E-109	2.3 STREET ADDRESS	5501 NW 7th apt E-315
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL 33126
TITLE	TD	3.1 TITLE	D Treasurer
NAME	SARDINAS, PEDRO	3.2 NAME	MARTINEZ, Alexis
STREET ADDRESS	5501 NW 7TH ST	3.3 STREET ADDRESS	5505 NW 7th apt W-401
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami, FL 33126
TITLE	VD	4.1 TITLE	D Secretary
NAME	HERNANDEZ, REINALDO	4.2 NAME	VILLAMARIN, CARLOS
STREET ADDRESS	3121 SW 23RD TERRACE	4.3 STREET ADDRESS	5501 NW 7th apt E-208
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami, FL 33126
TITLE	SD	5.1 TITLE	D
NAME	CARLOS VILLAMARIN	5.2 NAME	SARDINAS, Pedro
STREET ADDRESS	5501 NW 7TH ST #208	5.3 STREET ADDRESS	5501 NW 7th apt E-301
CITY-ST-ZIP	MIAMI FL 33126	5.4 CITY-ST-ZIP	Miami, FL 33126
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Reynaldo Hernandez Vice-President 3/9/99 305-447-9080
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/198)