


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 12, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 769455**  
1. Entity Name  
**AIRPORT LAKE WAREHOUSE CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**2030 NW 94TH AVENUE  
MIAMI, FL 33172**

Mailing Address  
**2030 NW 94TH AVENUE  
MIAMI, FL 33172**

**DO NOT WRITE IN THIS SPACE**



01122004 No Chg-NP CR2E037 (10/03)

4. FEI Number  
**59-2355136** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**CAUNEDO JR. AGUSTIN.  
2030 NW 94TH AVENUE  
MIAMI, FL 33172**

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IN THIS SPACE**

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 translating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

REGISTRATION UNIT  
04/12/04 08:00 AM 01122004

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CAUNEDO JR, AGUSTIN 2030 NW 94TH AVENUE MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEWIS, DONALD M 2030 NW 94TH AVENUE MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLGUIN, JORGE 2030 NW 74 AVE MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, LINDA 2030 NW 94TH AVENUE MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 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:**  **AGUSTIN CAUNEDO JR. TRUST** 4/7/2004 305 393-1700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #