2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## **FILED DOCUMENT # 769455** Feb 08, 2006 08:00 AM 1. Entity Name **Secretary of State** AIRPORT LAKE WAREHOUSE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 2030 NW 94TH AVENUE MIAMI FL 33172 2030 NW 94TH AVENUE MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2355136 Not Applicabl Zφ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAUNEDO JR. AGUSTIN. Street Address (P.O. Box Number is Not Acceptable) 2030 NW 94TH AVENUE MIAMI FL 33172 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 access the obligations of registered agent. SIGNATURE Signature, typed of printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campalgn Financing Make Check Payable to \$5.00 May Be 1 1815-253 Due By May 1, 2006 Trust Fund Contribution Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. STD TITLE Delete MUE A. Mili UN0000425100 CAUNEDO JR, AGUSTIN NAME 02/18/06-80080-013 61.25 2030 NW 94TH AVENUE STREET ADDRESS STREET ADDRESS MAIMI FL 33172 CITY - SI - ZIP CITY-ST-ZIP PD TITLE ☐ Delete -==- . \_ Change Addin TITLE LEWIS, DONALD M NAME 2030 NW 94TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP CiTY-ST-ZiP Delete. TITLE ☐ Change □ Att" HOLGUIN, JORGE NAME NAME 2030 NW 74 AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33172 CITY - ST-719 CITY-ST-ZIP TITLE Delete TITLE ☐ Change □ Add<sup>®</sup> NAME RODRIGUEZ, LINDA NAME 2030 NW 94TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33172 CITY-S1-ZIP ☐ Delete 3331 F TITLE ☐ Change □Add NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Ach" Change MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Cliy-ST-ZIP

12. I hereby certify that the information supplied with this fitting 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 direction 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 1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PLUS GT AT WITH CALLY SO IN THEAT.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

76/2006 305 593 - 1750