


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 10, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N01750**  
 1. Entity Name  
**THE FOUR STAR CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business      Mailing Address  
 1374 W. 44 ST.      1374 W. 44 ST.  
 HIALEAH, FL 33012 US      HIALEAH, FL 33012 US

**DO NOT WRITE IN THIS SPACE**



04062006 No Chg-NP CR2E037 (11/05)

4. FEI Number      Applied For  
 16-1680750      Not Applicable

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

6. Name and Address of Current Registered Agent  
 FERREY, PAOLA  
 1374 W. 44 ST.  
 HIALEAH, FL 33012

**DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title of corporation (NOTE: Registered Agent signature required when re-registering)

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	FERREY, PAOLA
STREET ADDRESS	1374 W. 44 ST.
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	V
NAME	RODRIGUEZ, ENRIQUE
STREET ADDRESS	1374 W. 44 ST.
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	S
NAME	MONZON, JULIETA
STREET ADDRESS	1374 W. 44 ST.
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	T
NAME	RODRIGUEZ, BETSY
STREET ADDRESS	1374 W. 44 ST.
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000501182  
 04/25/06-80052-008 61.25

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:** *Paula C. Ferry*      4/06/06      305-819-0513  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #