

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000912

FILED
Apr 29, 2009
Secretary of State

Entity Name: EL SOL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1655 W. 44TH PLACE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1655 WEST 44TH PLACE
UIT 408
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 51-0458906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORREGO, ROBERT
1655 WEST 44TH PLACE UNIT 408
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BORREGO, ROBERT
Address: 1655 WEST 44TH PLACE, UNIT 408
City-St-Zip: HIALEAH, FL 33012

Title: DVT () Delete
Name: RODRIGUEZ, ISIDRO
Address: 1655 W 44TH PL, UNIT 507
City-St-Zip: HIALEAH, FL 33012

Title: DS () Delete
Name: RODRIGUEZ, RICARDO
Address: 1655 W 44TH PL, UNIT 511
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: MORALES, ROBERTO
Address: 1655 W 44TH PL, UNIT 319
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: AGUILA, FABIO
Address: 1655 W 44TH PL, UNIT 435
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT BORREGO

PD

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date