

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000848

FILED
Jul 12, 2006
Secretary of State

Entity Name: YOLANDA VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

801 N.W. 47TH AVENUE
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

801 N.W. 47TH AVENUE
MIAMI, FL 33126 US

New Mailing Address:

801 N.W. 47TH AVENUE
LEASING OFFICE
MIAMI, FL 33126 US

FEI Number: 20-2288199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MENDEZ, SANDRA
315-86TH STREET
UNIT 3
MIAMI BEACH, FL 33141 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: PD () Delete
Name: MENDEZ, SANDRA
Address: 315-86TH STREET, #3
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: VPD () Delete
Name: MENDEZ, LAZARO
Address: 315-86TH STREET, #3
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: SD () Delete
Name: MENDEZ, STAVROULA
Address: 315-86TH STREET, #3
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: T () Delete
Name: SAROZA, ENRIQUE A
Address: 315-86TH STREET, #3
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: MENDEZ, MARIE E
Address: 801 N.W. 47TH AVENUE
City-St-Zip: MIAMI, FL 33126 US

I hereby certify that the information supplied with this filing does not qualify for the 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: STAVROULA MENDEZ

SD

07/12/2006

Electronic Signature of Signing Officer or Director

Date