## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001845

Entity Name: VISTA TRACE 2 CONDOMINIUM ASSOCIATION, INC.

FILED Apr 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2121 PONCE DE LENO BLVD., PH C/O MIAMI MANAGEMENT CORAL GABLES, FL 33134 C/O MIAMI MANAGEMENT 14275 SW 142 AVE

MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

2121 PONCE DE LENO BLVD., PH C/O MIAMI MANAGEMENT CORAL GABLES, FL 33134 C/O MIAMI MANAGEMENT 14275 SW 142 AVE

MIAMI, FL 33186

FEI Number: 20-4085379 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TRIAY, CARLOS P.A.
3750 NW 87 AVE #100
DORAL, FL 33178 US

TRIAY, CARLOS P.A.
2301 NW 87 AVE
501
DORAL, FL 33172 US

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: CARLOS TRIAY 04/07/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: VALDEZ, YVETTE G Name: TORRES, ESTEBAN

 Address:
 28927 S DIXIE HWY
 Address:
 14275 SW 142 AVE

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 MIAMI, FL 33186

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: DIAZ, BABARA Name: DIAZ, BABARA

Address: 15480 SW 284 ST #2101 Address: 14275 SW 142 AVE
City-St-Zip: HOMESTEAD, FL 33033 City-St-Zip: MIAMI, FL 33186

 Name:
 SCHULTZ, PAUL
 Name:
 JUAN, MOREJON

 Address:
 15480 SW 284 ST #2303
 Address:
 14275 SW 142 AVE

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 MIAMI, FL 33186

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: ESTEBAN TORRES PD 04/07/2009