

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 02, 2009  
Secretary of State**

DOCUMENT# N06000010351

Entity Name: BELA VISTA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2121 NE 168TH STREET  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

2121 NE 168TH STREET  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

FEI Number: 20-5890186      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CRESPO, MANUEL L  
10765 SW 104 STREET  
MIAMI, FL 33176 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: DPT ( ) Delete  
Name: BANEGAS, ARI  
Address: 7770 SW 104TH STREET, SUITE 209  
City-St-Zip: PINECREST, FL 33156 US

Title: DVS ( ) Delete  
Name: VICTORES, ABEL  
Address: 7770 SW 104TH STREET, SUITE 209  
City-St-Zip: PINECREST, FL 33156 US

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

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

Title: DPT (X) Change ( ) Addition  
Name: ROLDAN, MARTA  
Address: 2121 NE 168 STREET, UNIT 3  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: DVS (X) Change ( ) Addition  
Name: MARTELO, SOLISTER  
Address: 2121 NE 168 STREET, UNIT 6  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: DTS ( ) Change (X) Addition  
Name: MADRIZ, YOLANDA  
Address: 2121 NE 168 STREET, UNIT 11  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

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: MARTA ROLDAN

DPT

02/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date