2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2008 8:00 am
Secretary of State
02-22-2008 90018 020 ****61.25

DOCUMENT # N09832

1. Entity Name

FLAMENCO CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1055 W 77 STREET HIALEAH FL 33014	4445 W 16 AVE 308 HIALEAH FL 33012

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2539920 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BACALLAO, ORLANDO 3237 W 77 PL HIALEAH FL 33018	Name: FABELO, ROLAYME Street Address (P.O. Box Number is Not Acceptable): 9837 W OKEECHOBEE RD APT. 403 City: HIALEAH GARDENS **FL** Zip Code: 33016

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: Rolayme Fabelo 2-13-08
Signature, typed or printed name of registered agent and Title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BACALLO, ORLANDO 3237 W 77 PL HIALEAH FL 33018	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FABELO, ROLAYME 9837 W OKEECHOBEE RD # 403 HIALEAH GARDENS FL 33016	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V FABELO, ROYAYME 1055 W 77TH ST #105 HIALEAH FL 33014	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DE LA PUENTE, ARMANDO 1055 W 77 St # 312 HIALEAH, FL. 33014	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CONTRERAS, OSCAR 1055 W 77TH ST #105 HIALEAH FL 33014	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JORGE, JOSE 1055 W 77 St # 206 HIALEAH, FL. 33014	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DIAZ, ELENA 1055 W 77 St # 412 HIALEAH, FL 33014	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROENES, ADOLFO 1055 W 77 St # 210 HIALEAH, FL 33014	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Rolayme 2-13-08 305-833-1201