

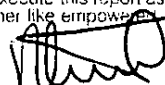
2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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 1055 W 77 STREET HIALEAH FL 33014			Mailing Address 4445 W 16 AVE 308 HIALEAH FL 33012		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2539920	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BACALLAO, ORLANDO 3237 W 77 PL HIALEAH FL 33018				7. Name and Address of New Registered Agent 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: <u>Rolayne Fabelo</u>  DATE: <u>2-13-08</u> Signature typed or printed name of registered agent and the Florida cable. (NOTE: Registered Agent signature and record when reinstating)					
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	☐ 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	☐ 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	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ 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 empowerment.

SIGNATURE: Rolayne Fabelo  2-13-08 305-803-1201