

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30434

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** PRESIDENTIAL CORNERS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

199 SOUTHWEST 12TH AVENUE  
MIAMI, FL 331308056

**New Principal Place of Business:**

**Current Mailing Address:**

199 SW 12TH AVENUE  
#199  
MIAMI, FL 33130

**New Mailing Address:**

**FEI Number:** 65-0114982      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MENDOZA, JOSE  
199 SW 12TH AVENUE  
199  
MIAMI, FL 33130 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: D  
Name: ANGUEIRA, ALEX  
Address: 199 SW 12TH AVE, #301  
City-St-Zip: MIAMI, FL 33130

Title: TD  
Name: CRUZ, MABEL  
Address: 199 SW 12 AVE #506  
City-St-Zip: MIAMI, FL 33130

Title: D  
Name: BETHENCOURT, HERBERTO  
Address: 199 SW 12 AVE. #COMMERICAL UNIT  
City-St-Zip: MIAMI, FL 33130

Title: D  
Name: CAMACHO, DOLORES  
Address: 199 SW 12 AVE., #304  
City-St-Zip: MIAMI, FL 33130

Title: P  
Name: MENDOZA, JOSE  
Address: 199 SW12TH AVE STE 199  
City-St-Zip: MIAMI, FL 33130

Title: D  
Name: VIRELLES, IRAIDA  
Address: 199 SW 12 AVE, #408  
City-St-Zip: MIAMI, FL 33130

I hereby 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 all other like empowered.

SIGNATURE: MABEL CRUZ

TD

01/11/2010

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

\_\_\_\_\_  
Date