

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50383

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: LOS PALACIOS CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

900 W. 49 ST.  
STE 220  
HIALEAH, FL 33012 US

## New Principal Place of Business:

3355 W. 68 ST.  
HIALEAH, FL 33018 US

## Current Mailing Address:

900 W. 49 ST.  
STE 220  
HIALEAH, FL 33012 US

## New Mailing Address:

FEI Number: 65-0447932      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELATORRE, CLEMENTE J  
900 W. 49 ST  
STE 220  
HIALEAH, FL 33012 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: PD ( ) Delete  
Name: MARTINEZ, JOSE  
Address: 900 W 49TH ST STE 220  
City-St-Zip: HIALEAH, FL 33012

Title: VD ( ) Delete  
Name: PALACIO, ALEX  
Address: 900 W 49TH ST STE 220  
City-St-Zip: HIALEAH, FL 33012

Title: TD ( ) Delete  
Name: GARCIA, PEDRO  
Address: 900 W 49 ST STE 220  
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete  
Name: GARCIA, EDDY  
Address: 900 W 49 ST STE 220  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MARTINEZ, JOSE  
Address: 900 W 49TH ST STE 220  
City-St-Zip: HIALEAH, FL 33012 US

Title: VD (X) Change ( ) Addition  
Name: PALACIO, ALEX  
Address: 900 W 49TH ST STE 220  
City-St-Zip: HIALEAH, FL 33012 US

Title: TD (X) Change ( ) Addition  
Name: GARCIA, PEDRO  
Address: 900 W 49 ST STE 220  
City-St-Zip: HIALEAH, FL 33012 US

Title: D (X) Change ( ) Addition  
Name: GARCIA, EDDY  
Address: 900 W 49 ST STE 220  
City-St-Zip: HIALEAH, FL 33012 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: JOSE MARTINEZ

PD

04/17/2009

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

\_\_\_\_\_  
Date