N94000005657

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(City/State/Zip/Phone #)	
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COVER LETTER

Division of Corporations		
SUBJECT: Lakeside V Condomini (Name of Corporatio	um Association Inc.	
DOCUMENT NUMBER: N94 0000565	7	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
and the same state of the same		
Cheorge Milio (Name of Contact Pers	an	
(Name of Contact Pers	on)	
Lay asida Nasa A	2000	
Lakeside V Condominium Ass.		
(Print/Company)		
12011 CINI 128.04		
13016 SW 128 St (Address)		
MIQMI, TO 33186 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (305) 971-2944 (Area Code & Daytime Telephone Number)		
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Lakeside V Condominium Fissociation, 1
2. The principal office address: 13024 SW 128 ST
MIAMI, FL 33186
3. The mailing address (if different): 130 10 SW 1265+
MIAMI, FL 33180
4. Date of incorporation/qualification: 11-14-94 Document number: N9400005457
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Empress Property Mant
15100 c 1210ct Stell
131903 131031 310 10
MIAMI, FL 331910
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Creorge Milian
130 10 SW 12 8 ST (P.O. Box NOT acceptable)
MIAMI, FL 33186
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Petasanids President
(Signature of an officer or director) (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
July 16, 2008
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * * FILING FEE: \$35.00 * * *