2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03174

RT FILED Nov 29, 2006 Secretary of State

Entity Nan	ne: CRYSIA	L LAKE VILLAS CONDOMINIU	JM ASSOCIATION, IN	С.		
Current Principal Place of Business: 13200 SW 128 ST SUITE B-2 MIAMI, FL 33186			New Princ	New Principal Place of Business: 12350 SW 132 CT SUITE 114 MIAMI, FL 33186		
			SUITE 114			
Current M	ailing Addre	ss:	New Maili	New Mailing Address:		
13200 SW SUITE B-2 MIAMI, FL			12350 SW SUITE 114 MIAMI, FL			
FEI Number:	65-0673303	FEI Number Applied For ()	FEI Number Not Appl	cable () Certificate of Status Des	ired()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
CRYSTAL LAKE VILLAS CONDO. C/O ALLIED PROPERTY GROUP INC. 13200 SW 128 ST STE B2 MIAMI, FL 33186 US The above named entity submits this statement for the purpos			C/O ALLIÉI 12350 SW MIAMI, FL	ALVAREZ, GABRIEL C/O ALLIED PROPERTY GROUP INC. 12350 SW 132 CT, STE 114 MIAMI, FL 33186 US		
in the State		submits this statement for the p	purpose of changing f	s registered office of registered ager	it, or both,	
SIGNATURE: GABRIEL ALVAREZ				11/29/2006		
	Electro	nic Signature of Registered Ag	ent	Date		
OFFICERS	S AND DIREC	CTORS:	ADDITION	S/CHANGES TO OFFICERS AND D	DIRECTOR	
Title: Name: Address: City-St-Zip:	VD (DELGADO, EF 15459 SW 80 MIAMI, FL 33	ST., #104	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD (PEREZ, ALBE 15471 SW 80 MIAMI, FL 33	ST #103	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	BELKIS, LEAL	STREET # 101	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	TD () Change (X) Addition MARTINEZ, OLGA 15451 SW 80 ST # 101 MIAMI, FL 33193		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition RODRIGUEZ, OSVALDO 15451 SW 80 ST #101 MIAMI, FL 33193		

I hereby certify that the information supplied with this filing does not qualify for the 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: BELKIS LEAL PD 11/29/2006