2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729448

FILED May 01, 2007 Secretary of State

Entity Name: WESTLAND SOUTH CONDOMINIUM, INC.

	rincipal Place of Business:	New Principal Place of Business:	New Principal Place of Business:	
	TAINBLEAU BLVD			
STE 200 MIAMI, FL	33172 US			
Current M	ailing Address:	New Mailing Address:		
275 FONT. MIAMI, FL	AINEBLEAU BLVD #200 33172 US			
n accordan	59-1679103 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did		ed ()	
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:		
	NESTOR 3 ST, STE #209 ABLES, FL 33134 US			
	named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent	or both,	
SIGNATUF	RE:			
	Electronic Signature of Registered A	gent Date		
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS	
Γitle: √ame: ∖ddress:	VD () Delete MONTESINOS, ARMANDO 275 FONTAINEBLEAU BLVD. #200	Title: () Change () Addition Name: Address:		
	MIAMI, FL 33172	City-St-Zip:		
City-St-Zip: Title: Name: Address: City-St-Zip:				
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	MIAMI, FL 33172 PD () Delete RODRIGUEZ, MANUEL 275 FONTAINEBLEAU BLVD. #200	City-St-Zip: Title: () Change () Addition Name: Address:		
City-St-Zip: Title: Name: Address:	MIAMI, FL 33172 PD () Delete RODRIGUEZ, MANUEL 275 FONTAINEBLEAU BLVD. #200 MIAMI, FL 33172 SD () Delete RIVERA, VICTOR 275 FONTAINEBLEAU BLVD. #200	City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:		
City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Name: Address:	MIAMI, FL 33172 PD () Delete RODRIGUEZ, MANUEL 275 FONTAINEBLEAU BLVD. #200 MIAMI, FL 33172 SD () Delete RIVERA, VICTOR 275 FONTAINEBLEAU BLVD. #200 MIAMI, FL 33172 TD () Delete RODRIGUEZ, MARIA T 275 FONTAINEBLEAU BLVD. #200	City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:		

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: MANUEL RODRIGUEZ PD 05/01/2007