

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41878

FILED
Jan 09, 2012
Secretary of State

Entity Name: L'EXCELLENCE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5757 COLLINS AVE.
ADMIN OFFICE
MIAMI BCH., FL 33140 US

New Principal Place of Business:

Current Mailing Address:

5757 COLLINS AVE.
ADMIN OFFICE
MIAMI BCH., FL 33140 US

New Mailing Address:

FEI Number: 65-0247650 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIR STE 1102
CORAL GABLES, FL 33134 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: P
Name: PARODI, JUAN M
Address: 5757 COLLINS AVE. 801
City-St-Zip: NORTH MIAMI BEACH, FL 33140

Title: VP
Name: FERNANDEZ, LUIS
Address: 5757 COLLINS AVE, 1504
City-St-Zip: NORTH MIAMI BEACH, FL 33140

Title: T
Name: NEGRIN, LAZARO
Address: 5757 COLLINS AVE. 2105
City-St-Zip: MIAMI BEACH, FL 33140

Title: S
Name: ROQUE, OLGA M
Address: 5757 COLLINS AVE. 1604
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: FRAGA, JOSE
Address: 5757 COLLINS AVE. 1905
City-St-Zip: MIAMI BCH., FL 33140 US

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: JUAN MIGUEL PARODI

PRES

01/09/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date