

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754450

**Entity Name:** INTERNATIONAL LAKE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 22, 2015**  
**Secretary of State**  
**CC5438418174**

**Current Principal Place of Business:**

5979 N.W. 151ST STREET  
SUITE 101  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

5979 N.W. 151ST STREET  
SUITE 101  
MIAMI LAKES, FL 33014 US

**FEI Number: 59-2430087**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FM LAW GROUP  
14100 PALMETTO FRONTAGE RD  
SUITE 390  
MIAMI LAKES, FL 33016 US

*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: HECTOR MARTINEZ**

**01/22/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BRENES, IRELA  
Address        5979 N.W. 151ST STREET  
                 SUITE 101  
City-State-Zip: MIAMI LAKES FL 33014

Title            DIRECTOR  
Name            SUAREZ, AMAURI  
Address        5979 N.W. 151ST STREET  
                 SUITE 101  
City-State-Zip: MIAMI LAKES FL 33014

Title            DIRECTOR  
Name            SARDY, IDALBERTO  
Address        5979 N.W. 151ST STREET  
                 SUITE 101  
City-State-Zip: MIAMI LAKES FL 33014

Title            TREASURER  
Name            HAM, ARLENE  
Address        5979 N.W. 151ST STREET  
                 SUITE 101  
City-State-Zip: MIAMI LAKES FL 33014

Title            SECRETARY  
Name            MARTINEZ, ROBERTO  
Address        5979 N.W. 151ST STREET  
                 SUITE 101  
City-State-Zip: MIAMI LAKES FL 33014

*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: IRELA BRENES**

**P**

**01/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date