

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765151

Entity Name: LAS BRISAS VILLAGE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**14275 SW 142 AVE
MIAMI, FL 33186**Current Mailing Address:**14275 SW 142 AVE
MIAMI, FL 33186 US**FEI Number:** 59-2243372**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRIAY , CARLOS A P.A.
2301 NW 87TH AVE
501
DORAL, FL 33172 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:** CARLOS A TRIAY

04/04/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, DIRECTOR
Name ROJAS, NORMA
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

Title VP, DIRECTOR
Name ABREU, RAYSA
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

Title D
Name VAZQUEZ, JUAN DANIEL
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

Title D
Name MACAU, GASTON
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

Title S, DIRECTOR
Name GUTIERREZ, SARA
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

Title T, DIRECTOR
Name ORTIZ, NANCY
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name ADAMS , JULIO MR
Address 14275 SW 142 AVE
City-State-Zip: MIAMI FL 33186

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: NORMA ROJAS

PRESIDENT

04/04/2014

Electronic Signature of Signing Officer/Director Detail

Date