

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000001827

**FILED**  
**Feb 17, 2014**  
**Secretary of State**  
**CC2970650149**

**Entity Name:** LAS BRISAS AT COUNTRY CLUB OF MIAMI CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8140 NW 155TH STREET  
101  
MIAMI LAKE, FL 33016

**Current Mailing Address:**

8140 NW 155 ST. SUITE 101  
MIAMI LAKES, FL 33016

**FEI Number: 68-0610374**

**Certificate of Status Desired: No**

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

RITTER, ZARERSKY & LIEBER, LLP  
2915 BISCAYNE BLVD., SUITE 300  
MIAMI, FL 33137 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P, PRESIDENT  
Name PRADA, KERLYN  
Address 8140 NW 155TH STREET 101  
City-State-Zip: MIAMI LAKES FL 33016

Title VP  
Name NIMO, MARIANO  
Address 8140 NW 155TH STREET 101  
City-State-Zip: MIAMI LAKES FL 33016

Title ST  
Name MENENDEZ, OSCAR  
Address 8140 NW 155TH STREET 101  
City-State-Zip: MIAMI LAKES FL 33016

*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: KERLYN PRADA**

**PRESIDENT**

**02/17/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date