

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000000038

**Entity Name:** GABRIELLA CONDOMINIUM CENTER ASSOCIATION, INC.

**Current Principal Place of Business:**

900 W 49 ST  
SUITE 220  
HIALEAH, FL 33012

**Current Mailing Address:**

900 W 49 ST  
SUITE 220  
HIALEAH, FL 33012 US

**FEI Number:** 65-0898762

**Certificate of Status Desired:** No

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

DELATORRE, CLEMENTE J  
900 W 49 ST  
SUITE 220  
HIALEAH, FL 33012 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 PD  
Name RIVAS, GERARDO  
Address 900 W 49 ST STE 220  
City-State-Zip: HIALEAH FL 33012

Title TS  
Name FLOREZ, GLORIA  
Address 900 W 49 ST STE 220  
City-State-Zip: HIALEAH FL 33012

*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:** GERARDO RIVAS

PD

03/26/2013

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

\_\_\_\_\_  
Date