## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 202789**

Entity Name: CONDADO, INC. OF SINGER ISLAND

FILED Mar 03, 2008 Secretary of State

•		<b>,</b>		
Current Principal Place of Business:			New Principal Place of Business:	
5060 N. O SINGER IS	CEAN DR SLAND, FL 33	3404		
Current Mailing Address:			New Mailing Address:	
5060 N. OCEAN DR				
102 SINGER IS	SLAND, FL 33	3404		
FEI Number	: 59-1674932	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
500 AUST 9TH FLOC	BARDEN, PET RALIAN AVE : OR LM BEACH, F	3		
	named entity e of Florida.	submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DTS ( PASHAIAN, LA 30 VARICK CO ROCKVILLE, N	DURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	HAIG, LINDA 383 JEFFERS	) Delete ON STREET UARE, NY 11010	Title: Name: Address: City-St-Zip:	( ) Change() Addition
Title: Name: Address: City-St-Zip:	BIANCHINI, MA 8837 WENDY		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ( RANDAZZO, J 2519 FORTES OCEANSIDE, I	QUE AVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	DVP (	) Delete	Title:	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LARRY PASHAIAN TREA 03/03/2008

DEBRA, WANGRUD

53552 OAKVIEW DRIVE

SHELBY TOWNSHIP, MI 48315

Name:

Address:

City-St-Zip: