

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729722

FILED
Mar 19, 2009
Secretary of State

Entity Name: THE IMPERIAL TERRACES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1825 W. 44TH PL.
OFF 1212
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

1825 W. 44TH PL.
OFF 1212
HIALEAH, FL 33012 US

New Mailing Address:

8798 S.W. 8TH STREET
SUITE 6
MIAMI, FL 33174 US

FEI Number: 59-1603328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTANEDA, WALDO
1825 W 44TH PLACE
706
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASTANEDA, WALDO
Address: 1825 W 44TH PLACE #706
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: CRUZ, TANIA
Address: 1825 W 44TH PL #1105
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: CUELLA, MARYLIN
Address: 1825 W 44TH PL #502
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: DIAZ, PABLO
Address: 1825 W. 44TH. PLACE #1005
City-St-Zip: HIALEAH, FL 33012

Title: VPD () Delete
Name: EIRAS, OSCAR M
Address: 1825 W 44TH PLACE, #704
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALDO CASTAÑEDA

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date