


2007 NOT-FOR-PROFIT CORPORATION
• ANNUAL REPORT

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # 729857 1. Entity Name EL JARDIN CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 960 SW 4TH ST. MIAMI, FL 33130-2261	Mailing Address 960 SW 4TH ST. MIAMI, FL 33130-2261
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DO NOT WRITE IN THIS SPACE



01072007 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VIAMONTE, ELIA
960 S.W. 4TH ST. #23
MIAMI, FL 33130

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Elia Viamonte Elia Viamonte 01.07.07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000583538 01/11/07-80075-018 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PEREZ, REBECCA 960 SW 4TH ST APT 23 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEREZ, HECTOR 960 SW 4TH ST APT 25 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FACENDA, JUAN 960 SW 4TH ST APT 11 MIAMI, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hector Perez Hector Perez 01-07-07 305.324.8001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #