

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733264

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** THE PRADO CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10711 SW 108 AV  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

10711 SW 108 AV  
MIAMI, FL 33176

**New Mailing Address:**

3399 N.W. 72 AVE.  
SUITE 215  
MIAMI, FL 33122

**FEI Number:** 59-1778091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUGGER, ROBERT A SR  
3399 N.W. 72 AV  
SUITE #215  
MIAMI, FL 33122 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: P ( ) Delete  
Name: MENDOZA, MARIA  
Address: 10651 S.W. 108TH AV APT 1E  
City-St-Zip: MIAMI, FL 33176

Title: VPD ( ) Delete  
Name: SAAMAN, JORGE  
Address: 10651 S.W. 108TH AV APT 1J  
City-St-Zip: MIAMI, FL 33176

Title: SD ( ) Delete  
Name: BEHNEJAD, RAY  
Address: 10661 S.W. 108TH AV APT 3B  
City-St-Zip: MIAMI, FL 33176

Title: AS ( ) Delete  
Name: LUCAS, LIS  
Address: 10651 S.W. 108TH AVE 2-B  
City-St-Zip: MIAMI, FL 33176

Title: T ( ) Delete  
Name: SPUND, YOLANDA  
Address: 10661 SW 108 AV APT 4D  
City-St-Zip: MIAMI, FL 33176

**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: MARIA MENDOZA

P

01/13/2009

Electronic Signature of Signing Officer or Director

Date