


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 08, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 747969</b>		
1. Entity Name <b>LAS PALMAS CONDOMINIUM NO. 9/10 ASSOCIATION, INC.</b>		
Principal Place of Business <b>1512 S.W. 104 AVE. MIAMI FL 33174 US</b>	Mailing Address <b>1512 S.W. 104 AVE. MIAMI FL 33174 US</b>	
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip Country
<b>6. Name and Address of Current Registered Agent</b>		
<b>CAMPELLO, MORAIMA Y. 1512 S.W. 104 AVENUE MIAMI FL 33174-2770</b>		
<b>7. Name and Address of New Registered Agent</b>		
Name		
Street Address (P.O. Box Number is Not Acceptable)		
City		
<b>FL</b> Zip Code		



MOORE CR2E037 (11/03)

4. FEI Number <b>65-0336449</b>	Applied For	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required		
<b>6. Name and Address of Current Registered Agent</b>		
<b>7. Name and Address of New Registered Agent</b>		

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PTD CAMPELLO, MORAIMA Y 1512 S.W. 104 AVENUE MIAMI FL 33174-2770	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition  U00000080703 03/08/04-80120-006 61.25
TITLE	SD RODRIGUEZ, JOSE 1510 SW 104 AVE MIAMI FL 33174-2770	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D RODRIGUEZ, PETRONILA 1510 SW 104 AVE MIAMI FL 33174-2770	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** *Moraima Y Campello* **MORAIMA Y CAMPELLO** **MARCH 3/04** *305-551-2242*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #