الا الا الماسكيم **2005 NOT-FOR-PROFIT CORPORATION**

ANNUAL REPORT

DOCUMENT #755006



FILED Apr 08, 2005 8:00 am Secretary of State 04-08-2005 90033 046 ****61.25

LAGO VERDE CONDOMINIUM ASSN., INC.											
Principal Place of Business GUARANTEE MANAGEMENT SERVICES 6925 NW 42ND ST MIAMI, FL 33166-6820			Mailing Address GUARANTEE MANAGEMENT SERVICES 6925 NW 42ND ST MIAMI, FL 33166-6820				20027855				
Principal Place of Business											
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Suite, Apt.	#, etc.	Suite, Apt. #, etc.					03142005 Ch	ig-NP	CR2E037	(10/03)	
City & State	8	City & State					4. FEI Number Applied F 59-2038485 Not Applie			plied For t Applicable	
Zip	Country		Zip (Country		5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name and Address of Current	Registere	gistered Agent			7. Name and Address of New Registered Agent					
BECKER & POLIAKOFF					- Name						
ROSA DE LA CAMARA 5201 BLUE LAGOOD DR., STE 100					Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL	33126				City					Zip Code	Э
8 The shove	named entity submits this statement to	r the ouro	ose of changing its re	agistere		renister	ed agent, or both, in	the State of Flo	FL rida Lam (ar		
	ions of registered agent.	i tile puip	OSO OF CHARGING IS TO	-Aistoi e	od Onice Or I	-agiston	ed again, or both, in	ino olato or re	maa. Tamra	THECH THILIT,	and accept
SIGNATURE .	:										<u> </u>
· · · · · · ·	Signature, typed or printed name of registered agent	and title if app	licable. (NOTE:	Registered	d Agent _, signatur	e required	when reinstating)		DATE		
-	Filing Fee is \$61.25 Due by May 1, 2005		 Election Campaign Financia Trust Fund Contribution. 			<u> </u>	\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.	OFFICERS AND DIRECTORS Delete				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10						
TITLE NAME	ALVAREZ, JOSEPH		Delete TITL						•	Change	Addition
STREET ADDRESS CITY-ST-ZIP	12219 S.W. 14 LN. #2409 MIAMI, FL 33184			ET ADDRESS - ST- ZIP						i	
TITLE	VD		Delete	TITLE		V٠	ρ.	20-		∑ Change	Addition
NAME STREET ADDRESS	GONZALEZ-ABREV, MANUEL 12209 SW 14 LN # 1312			NAM STRE	ET ADDRESS	AN	A MARIA	14 LN:	# 120	16	
CITY-ST-ZIP	MIAMI, FL 33184				-ST-ZIP	Mi	19MI FL 33/84				
TITLE	TD GONZALEZ-ABREU, MAYRA		Delete	TITLE	1	+4	EAS.			Change	Addition
NAME STREET ADDRESS	12219 SW 14 LN # 2308	-			ET ADDRESS	7	NGEL CA	PRACE 2. 14 L	d0 #	2006	
CITY-ST-ZIP	MIAMI, FL 33184				-ST-ZIP	iñ	Ami FL	33/	84		
TITLE NAME	SD GIMENEZ, ANGEL		Delete	NAM					,	☐ Change	☐ Addition
STREET ADDRESS	12209 SW 14 LN # 1103				ET ADDRESS						
CITY-ST-ZIP	MIAMI, FL 33184		☐ Defete	TITLE	-ST-ZIP		** :		·	Change	Addition
NAME	PEREZ, GONZALO		_ butter	NAM	E		,				
STREET ADDRESS CITY-ST-ZIP	12239 SW 14 LN # 3102 MIAMI, FL 33184				ET ADDRESS -ST-ZIP						
TITLE			Delete	TITU						☐ Change	☐ Addition
NAME STREET ADDRESS	2		/ /	NAM STRE	ET ADDRESS						
CITY-ST-ZIP	·	į		CITY	-ST-ZIP .						
12. I hereby indicated of the coochanged	certify that the information supplied with i on this report or supplemental reports poration or the receiver or trustee emp , or on an attachment with an address,	this filing true and twered to with all at	does not qualify for t accurate and that my execute this report a fer like empowered.	the exe y signa s requi	mption state ture shall ha red by Char	ed in Se eve the s pter 617	ction 119.07(3)(i), Flo same legal effect as 7, Florida Statutes; an	orida Statutes. if made under o nd that my nam	further certif bath; that I an e appears in	y that the in an officer Block 10 o	nformation or director r Block 11 if
	1 4	B	sing composition				7.	15-2	201		
SIGNAT	URE: SIGNATURE AND TYPED OF	PRINTED NAI	ME OF SIGNING OFFICER O	A DIRECT	TOR			Date	Day	(time Phone #	