2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 16, 2006 **DOCUMENT#757813** Secretary of State

Entity Name: EL LAGO N.W. 7TH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

%VILAR PROPERTY 5501 5505 NW 7 STREET 305 ALCAZAR AVE. MIAMI, FL 33126

CORAL GABLES, FL 33134

New Mailing Address: Current Mailing Address:

%VILAR PROPERTY 305 ALCAZAR AVE

305 ALCAZAR AVE. CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 22-2368962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

VILAR PROPERTY MANAGEMENT 305 ALCAZAR AVE CORAL GABLES, FL 33134 US

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:

Name:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete HERNANDEZ, REYNALDO

(X) Change () Addition HERNANDEZ, REYNALDO Name:

5501 NW 7TH ST # E-315 Address: 5501 NW 7TH ST # E-315 Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

Title: PD (X) Delete Title: () Change () Addition

MARTINEZ, HUGO Name: Name: Address: 5505 NW 7 ST APT W-115 Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip:

Title: () Delete Title: (X) Change () Addition DELGADO, JOSE RAMON Name: DELGADO, JOSE RAMON Name: 5505 NW 7 ST #207 5505 NW 7 ST #207 Address: Address:

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

Title: () Delete Title: VPD (X) Change () Addition

Name: VILLAMARIN, CARLOS Name: VILLAMARIN, CARLOS 5501 NW 7 ST #208 5501 NW 7 ST #208 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

Title: () Delete Title: (X) Change () Addition

NOVOA, JOSA NOVOA, JOSA Name: Name: 501 NW 7 ST #101 501 NW 7 ST #101 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the 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: REYNALDO HERNANDEZ PD 08/16/2006