
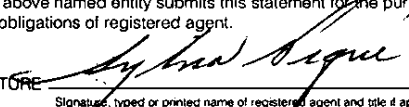
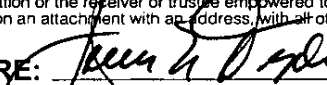


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2007 8:00 am**  
**Secretary of State**

04-16-2007 90071 008 \*\*\*\*61.25

<b>DOCUMENT # 758166</b> 1. Entity Name <b>LA ARBOLEDA II CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>275 FONTAINEBLEAU BLVD #140 MIAMI, FL 33172 US</b>			Mailing Address <b>C/O EXCEL MANAGEMENT ASSOCIATES, INC. 2510 N.W. 97TH AVENUE, SUITE 200 DORAL, FL 33172</b>		
2. Principal Place of Business - No P.O. Box # <b>2510 NW 97 Ave</b>		3. Mailing Address Suite, Apt., #, etc. <b>Suite 200</b>			
City & State <b>DORAL, FL</b>		City & State <b>DORAL, FL</b>			
Zip <b>33172</b>		Country <b>US</b>		4. FEI Number <b>59-2199439</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>ALVAREZ, ELIANA EXCEL MANAGEMENT ASSOC. 2570 NW 97 AVE #200 DORAL, FL 33172</b>			7. Name and Address of New Registered Agent Name <b>Sylvia Pique</b> Street Address (P.O. Box Number is Not Acceptable) <b>Excel Management</b> <b>2510 NW 97 AVE.. Suite 200</b> City <b>DORAL</b> <b>FL</b> Zip Code <b>33172</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 					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD* TRUJILLO, JESUS 710 NW 106 AVE. #1 MIAMI, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GARCIA, ERICK 750 NORTHWEST 106TH AVE #4 MIAMI, FL 33172	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GONZALEZ, GLORIA 760-5 NW 106 AVE MIAMI, FL 33172	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ARMENGOL, CARLOS 750-2 NW 106 AVE MIAMI, FL 33172	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASTRO, ANA 760-3 NW 106 AVE MIAMI, FL 33172	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>D Pedraza Ramiro 716-4 NW 106 Ave Miami FL-33172</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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.					
<b>SIGNATURE:</b> 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date <b>3/5/07</b> Daytime Phone # <b>305-436-6655</b>					