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

Feb 12, 2004 08:00 AM **DOCUMENT # 763015 Secretary of State** 1. Entity Name ARBORGATE AT KENDALL LAKES EAST, CONDOMINIUM NO 1 ASSOCIATION INC. Principal Place of Business Mailing Address 13641 S.W. 66TH STREET MIAMI FL 33183 13641 S.W. 66TH STREET MIAMI FL 33183 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 26-5728955 Not Applicable Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CALDERIN, ROBERTO 13641 SW 66TH STREET Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33183** City Zip Code 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 DATE (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Change Addition CALDERIN, ROBERTO NAME NAME U00000048454 13641 S.W. 66TH STREET STREET ADDRESS STREET ADDRESS 02/12/04-80081-007 61.25 MIAMI FL 33183 CITY - ST - ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE Addition RODRIGUEZ, MIRYAN NAME NAME 6531 SW 136TH COURT STREET ADDRESS STREET ADDRESS MIAMI FL CITY - ST- ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition CALDERIN, ROBERTO JR NAME NAME 13641 S.W. 66TH STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33183 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 attactment with an address, with all other like empowered.

SIGNATURE

ALDERIN

40160120

FILED