## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000000981

FILED May 13, 2009 Secretary of State

Entity Name: LAS BRISAS AT DORAL CONDOMINIUM NO. 4 ASSOCIATION, INC.

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

6925 NW 42 STREET 10705 NW 33 STREET MIAMI, FL 33166 100

DORAL, FL 33172

**Current Mailing Address: New Mailing Address:** 

6925 NW 42 STREET 10705 NW 33 STREET MIAMI, FL 33166 100 DORAL, FL 33172

FEI Number: 65-0985108 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BROUGH, CHADROW LEVINE P.A. 1900 N. COMMERCE PKWY WESTON, FL 33326

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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition GARCIA, BEVERLY CHIRINOS, LETICIA Name: Name: Address: 5785 NW 116 AVE 108 Address: 5785 NW 116TH AVE. #105 City-St-Zip: MIAMI, FL 33178 City-St-Zip: DORAL, FL 33178

Title: () Delete Title: (X) Change ( ) Addition GUERRERO, HERBERT Name: Name: GARLAND, JULIO

Address: 5791 N.W. 116TH AVENUE #106 Address: 5791 N.W. 116TH AVENUE #102

City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33178

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

Name: VAGHI, ANDREA Name: 5785 NW 116TH AVE. #103 Address: Address: City-St-Zip: City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify 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: LETICIA CHIRINOS DP 05/13/2009