2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2009
Secretary of State

DOCUMENT# N00000006631

Entity Name: LAKESIDE BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 661554
MIAMI SPRINGS, FL 33266

New Principal Place of Business:

1928 NW 79 AVENUE
MIAMI, FL 33126

Current Mailing Address:

PO BOX 661554
MIAMI SPRINGS, FL 33266

New Mailing Address:

FEI Number: 65-1071275 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SKRLD,INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: PERMUY, WALTER
Address: 1928 NW 79 AVENUE
City-St-Zip: MIAMI, FL 33126

Title: VD ( ) Delete
Name: GONZALEZ, HOMERO A
Address: 1920 NW 79 AVENUE
City-St-Zip: MIAMI, FL 33126

Title: STD ( ) Delete
Name: CUBIDES, ARIEL
Address: 1908 NW 79 AVENUE
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PERMUY, WALTER
Address: 1928 NW 79 AVENUE
City-St-Zip: MIAMI, FL 33126

Title: VP (X) Change ( ) Addition
Name: GONZALEZ, HOMERO A
Address: 1920 NW 79 AVENUE
City-St-Zip: MIAMI, FL 33126

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: WALTER PERMUY P 02/16/2009

Electronic Signature of Signing Officer or Director — Date