

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 13, 2009
Secretary of State

DOCUMENT# N01000000837

Entity Name: ALHAMBRA SEVEN CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3255 WEST 26TH AVE
APT 5
HIALEAH, FL 33016**New Principal Place of Business:**5255 WEST 26TH AVE
APT 5
HIALEAH, FL 33016**Current Mailing Address:**3255 WEST 26TH AVE
APT 5
HIALEAH, FL 33016**New Mailing Address:**5255 WEST 26TH AVE
APT 5
HIALEAH, FL 33016**FEI Number:** 65-1095562**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SANCHEZ, JUAN E
5255 W 26TH AVE.
HIALEAH, FL 33014 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: NOYOLA, MELBA
Address: 5255 W 26TH AVE #5
City-St-Zip: HIALEAH, FL 33014**Title:** VD () Delete
Name: MARTINEZ, ELIDO J
Address: 5255 W 26TH AVE #13
City-St-Zip: HIALEAH, FL 33014**Title:** SD () Delete
Name: MARTINEZ, DIANA
Address: 5255 WEST 26TH AVE SUITE 14
City-St-Zip: HIALEAH, FL 33016**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SD (X) Change () Addition
Name: GONZALEZ, JUAN C
Address: 5255 WEST 26TH AVE SUITE 6
City-St-Zip: HIALEAH, FL 33016

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: MELBA L NOYOLA

PD

08/13/2009

Electronic Signature of Signing Officer or Director

Date