2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000008861

T FILED

Nov 29, 2006

Secretary of State

Entity Name: LASESTRELLAS CONDOMINIUM ASSOCIATION, INC.

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

606 W. 81 STREET HIALEAH, FL 33014

Current Mailing Address: New Mailing Address:

8600 NW 17 STREET SUITE 145 DORAL, FL 33126

FEI Number: 71-0896645 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BETANCOURT, MENA & ASSOCIATES EISINGER, BROWN, LEWIS & FRANKEL, PA.

19 WEST FLAGLER STREET 4000 HOLLYWOOD BLVD SUITE 720 SUITE 265S

MIAMI, FL 33130 US HOLLYWOOD, FL 33021 US

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: DENNIS EISINGER 11/29/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: () Change () Addition

 Name:
 VEGA, MARISOL
 Name:

 Address:
 666 W. 81 STREET, APT#119
 Address:

 City-St-Zip:
 HIALEAH, FL 33014
 City-St-Zip:

Title: VP/D () Delete Title: VP/D (X) Change () Addition

Name: SANCHEZ, IDANIA Name: SUAREZ, IDANIA

Address: 606 W. 81 STREET, APT#119 Address: 606 W. 81 STREET, APT#119

City-St-Zip: HIALEAH, FL 33014 City-St-Zip: HIALEAH, FL 33014

Title: T/D () Delete Title: () Change () Addition

 Name:
 CORTES, FERNANDO
 Name:

 Address:
 666 W. 81 STREET, APT#121
 Address:

 City-St-Zip:
 HIALEAH, FL 33014
 City-St-Zip:

Title: S/D () Delete Title: () Change () Addition

 Name:
 LOPES, JESUS
 Name:

 Address:
 606 W. 81 STREET, APT#219
 Address:

 City-St-Zip:
 HIALEAH, FL 33014
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 SANTANA, GABRIEL
 Name:

 Address:
 606 W. 81 STREET, APT#417
 Address:

 City-St-Zip:
 HIALEAH, FL 33014
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: IDANIA SUAREZ VP/D 11/29/2006