
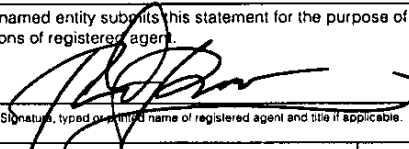
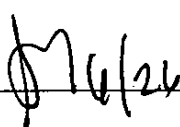
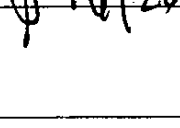
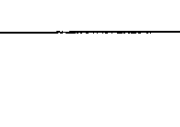
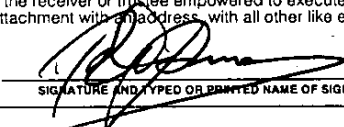


# 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

<b>DOCUMENT # N02000000912</b> 1. Entity Name <b>EL SOL CONDOMINIUM ASSOCIATION, INC.</b>				<b>FILED</b> <b>08 JUN 26 AM 6: 05</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>1655 W. 44TH PLACE HIALEAH, FL 33012</b>		Mailing Address <b>315 86TH STREET UNIT 3 MIAMI BEACH, FL 33131</b>			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>1655 West 44th Place</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>Unit 408</b>			
City & State		City & State <b>Hialeah, Florida</b>			
Zip	Country	Zip	Country	4. FEI Number <b>51-0458906</b>	
33012	USA	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>JOSEPH H. GANGUZZA &amp; ASSOCIATES, P.A. SUNTRUST INTERNATIONAL CENTER ONE S.E. THIRD AVENUE, UNIT 2150 MIAMI, FL 33131</b>			7. Name and Address of New Registered Agent Name <b>Robert Borrego</b> Street Address (P.O. Box Number is Not Acceptable) <b>1655 West 44th Place, Unit 408</b> City <b>Hialeah</b> <b>FL</b> Zip Code <b>33012</b>		
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 		<b>Robert Borrego, President</b>		<b>6/17/08</b> DATE	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>MELENZ, STAVROULA</b> <b>315-86TH ST # 3</b> <b>MIAMI BEACH, FL 33141</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director and President <b>Robert Borrego</b> <b>1655 West 44th Place, Unit 408</b> <b>Hialeah, FL 33012</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>MELENZ, LUIS</b> <b>315-86TH ST # 3</b> <b>MIAMI BEACH, FL 33141</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, Vice President, and Treasurer <b>Isidro Rodriguez</b> <b>1655 W. 44th PL UNIT 507</b> <b>HIALEAH FL 33012</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>RIVERA, MAGALIS C</b> <b>315-86TH ST # 3</b> <b>MIAMI BEACH, FL 33141</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director and Secretary <b>Ricardo Rodriguez</b> <b>1655 W 44th PL UNIT 511</b> <b>HIALEAH FL 33012</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <b>Roberto Morales</b> <b>1655 W. 44th PL UNIT 319</b> <b>HIALEAH FL 33012</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <b>Fabio Aguila</b> <b>1655 W. 44th PL UNIT 435</b> <b>HIALEAH FL 33012</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	600131812476 06/27/08--01030--005 **\$1.25		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.					
SIGNATURE: 		<b>Robert Borrego, President</b>		<b>6/17/08</b> Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					