

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001521

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** VILLAS ANDALUCIA, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5979 NW 151 STREET,  
STE. 101  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 160718  
HIALEAH, FL 33016

**New Mailing Address:**

**FEI Number:** 46-0473589

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FM LAW GROUP  
14100 PALMETTO FRONTAGE RD  
SUITE 390  
MIAMI LAKES, FL 33016 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: PDTE  
Name: DOMINGUEZ, ROXANA  
Address: 5979 NW 151 ST, SUITE 101  
City-St-Zip: MIAMI LAKES, FL 33014

Title: V  
Name: HERNANDEZ, DANIEL  
Address: 5979 NW 151 ST, SUITE 101  
City-St-Zip: MIAMI LAKES, FL 33014

Title: TD  
Name: MARTINEZ, DAVID  
Address: 5979 NW 151 ST, SUITE 101  
City-St-Zip: MIAMI LAKES, FL 33014

Title: SD  
Name: FIERO, JULIO  
Address: 5979 NW 151 ST, SUITE 101  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D  
Name: CLAVERO, LOURDES  
Address: 5979 NW 151 ST, SUITE 101  
City-St-Zip: MIAMI LAKES, FL 33014

I hereby 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 all other like empowered.

SIGNATURE: ROXANA DOMINGUEZ

PD

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date