

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02851

FILED
Apr 19, 2007
Secretary of State

Entity Name: VERSAILLES HOTEL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3425 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

3425 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 59-2399004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
STE 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: P () Delete
Name: MONTES, JR., JAVIER
Address: PO BOX 0707
City-St-Zip: MIAMI, FL 33245

Title: T () Delete
Name: DEDENGHY, JOHN
Address: 615 SW 200 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP () Delete
Name: ANILLO, LEONARDO
Address: 3425 COLLINS AVENUE #1201
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: TRIANA, JOSE
Address: 4150 SW 112 AVENUE
City-St-Zip: MIAMI, FL 33165

Title: S () Delete
Name: NARANJO, ROSA MARIA
Address: 2835 SW 82 AVE.
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: JAVIER MONTES

PRES

04/19/2007

Electronic Signature of Signing Officer or Director

Date