2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03661

FILED Jun 2<u>2, 2</u>009 Secretary of State

Entity Name: EL POLO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

401 SW 109 AVNEUE MIAMI, FL 33174 US

Current Mailing Address:

New Mailing Address:

3505 S OCEAN DRIVE

3505 S OCEAN DRIVE #7A

#3-B

HOLLYWOOD, FL 33019 LIS

Name and Address of Current Registered Agent:

HOLLYWOOD, FL 33019 US

FEI Number Not Applicable ()

Certificate of Status Desired ()

FEI Number: 59-2797083

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

FEI Number Applied For ()

Name and Address of New Registered Agent:

ESTEVEZ, AIDA

ESTEVEZ, AIDA

3505 SOUTH OCEAN DRIVE SUITE 31 HOLLYWOOD, FL 33019 US 3505 SOUTH OCEAN DRIVE

SUITE 7A

Name:

Title:

Name:

Address:

City-St-Zip:

HOLLYWOOD, FL 33019 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: AIDA ESTEVEZ

06/22/2009

Electronic Signature of Registered Agent

Date

(X) Change () Addition

(X) Change () Addition

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

3505 SOUTH OCEAN DRIVE STE 7A

3505 SOUTH OCEAN DRIVE STE 7A

() Delete

ESTEVEZ, AIDA Name:

Address:

3505 SOUTH OCEAN DRIVE STE 3A

City-St-Zip: HOLLYWOOD, FL 33019

Title: () Delete

Name: LADNER, ANALIA

Address: 3505 SOUTH OCEAN DRIVE STE 3A

City-St-Zip: HOLLYWOOD, FL 33019

Title: VPD () Delete

ESTEVEZ, ULISES Name:

3505 SOUTH OCEAN DRIVE STE 3A Address: City-St-Zip: HOLLYWOOD, FL 33019

Address: City-St-Zip:

> Title: **VPD** (X) Change () Addition

LADNER, ANALIA

ESTEVEZ, AIDA

HOLLYWOOD, FL 33019

HOLLYWOOD, FL 33019

ESTEVEZ, ULISES Name:

3505 SOUTH OCEAN DRIVE STE 7A Address:

City-St-Zip: HOLLYWOOD, FL 33019

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: AIDA ESTEVEZ PD

Electronic Signature of Signing Officer or Director

06/22/2009 Date