

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001412

**FILED**  
**Feb 02, 2010**  
**Secretary of State**

**Entity Name:** MIAMI GARDENS PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

18300 NW 62ND AVE  
STE 300  
HIALEAH, FL 33015 US

**New Principal Place of Business:**

18300 NW 62ND AVE  
STE 210  
HIALEAH, FL 33015 US

**Current Mailing Address:**

PO BOX 4441  
HIALEAH, FL 33014 US

**New Mailing Address:**

FEI Number: 55-0865716

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANCHEZ, FERNANDO J  
18300 NW 62ND AVE, STE 300  
HIALEAH, FL 33015 US

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

TORREGROSA, MABEL  
18300 NW 62ND AVE, STE 210  
HIALEAH, FL 33015 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: MABEL TORREGROSA

02/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: TORREGROSA, MABEL  
Address: 18300 NW 62ND AVE, STE 210  
City-St-Zip: HIALEAH, FL 33015

Title: D  
Name: SANCHEZ, FERNANDO J  
Address: 18300 NW 62ND AVE STE 300  
City-St-Zip: MIAMI GARDENS, FL 33015

Title: D  
Name: NGUYEN, WILLIAM  
Address: 18300 NW 62ND AVE STE 130  
City-St-Zip: MIAMI GARDENS, FL 33015

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: MABEL TORREGROSA

DP

02/02/2010

Electronic Signature of Signing Officer or Director

Date