2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010316

FILED Oct 25, 2006 Secretary of State

Entity Name: SUNSET LAKE ESTATES II HOMEOWNER'S ASSOCIATION, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:	
300 ARAG SUITE 210)	8600 NW 17 STREET SUITE 145	
MIAMI, FL	33134	DORAL, FL 33126	
Current M	lailing Address:	New Mailing Address:	
300 ARAG SUITE 210 MIAMI, FL)	8600 NW 17 STREET SUITE 145 DORAL, FL 33126	
n accordan	: 65-0933433 FEI Number Applied For () ice with s. 607.193(2)(b), F.S., the corporation did no	receive the prior notice.	Status Desired ()
Name and	Address of Current Registered Agent:	Name and Address of New Register	rea Agent:
300 ARAĆ SUITE 210		EISINGER, DENNIS 4000 HOLLYWOOD BOULEVARD SUITE 265-S HOLLYWOOD, FL 33021 US	
	e named entity submits this statement for the pe of Florida.	urpose of changing its registered office or regist	ered agent, or both,
SIGNATURE: DENNIS EISINGER		10/25/	/2006
	Electronic Signature of Registered Age	nt Date	<u> </u>
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS
Title: Name: Address: City-St-Zip:	P () Delete HART-LOPEZ, JACQUELINE 16325 SW 70 STREET MIAMI, FL 33193	Title: () Change () Ad Name: Address: City-St-Zip:	dition
Title: Name: Address: City-St-Zip:	VP () Delete CARRION, ORLANDO 70035 SW 162 PATH MIAMI, FL 33193	Title: () Change () Ad Name: Address: City-St-Zip:	dition
Title: Name: Address: City-St-Zip:	T () Delete RUIDIAZ, PATRICIA 16374 SW 68 TERRACE MIAMI, FL 33193	Title: () Change () Ad Name: Address: City-St-Zip:	dition
,		Title: () Change () Ad	

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: JACQUELINE LOPEZ P 10/25/2006