

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90364 012 ****70.00

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1. Entity Name
EL LAGUITO CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

9571 NW 45TH ST
MIAMI, FL 33178 US

Mailing Address

9571 NW 45TH ST
MIAMI, FL 33178 US

DO NOT WRITE IN THIS SPACE



03132006 No Chg-NP

CR2E037 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, VICTOR
9571 NW 45 ST
MIAMI, FL 33178

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME FERNANDEZ, VICTOR
STREET ADDRESS 9571 NW 45TH ST
CITY-ST-ZIP MIAMI, FL 33178

TITLE VD
NAME FERNANDEZ, ESPERANZA
STREET ADDRESS 9571 NW 45TH ST
CITY-ST-ZIP MIAMI, FL 33178

TITLE STD
NAME FERNANDEZ, ELENA
STREET ADDRESS 11340 SW 93 CT.
CITY-ST-ZIP MIAMI, FL 33176

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICTOR Fernandez, Pres. 3/3/06 305-463-8015

Date

Daytime Phone #