


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N04513</b> 1. Entity Name <b>VILLAS DE CANCUN CONDOMINIUM ASSOCIATION INC.</b>		
Principal Place of Business <b>10851 N.W. 6TH STREET MIAMI, FL 33174 US</b>	Mailing Address <b>10851 N.W. 6TH STREET MIAMI, FL 33174 US</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>FRAGA, CANDIDO 10851 S.W. 6TH STREET MIAMI, FL 33174</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRAGA, CANDIDO 10851 S.W. 6TH STREET MIAMI, FL 33174	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GONZALEZ, OLINDA 10833 S.W. 6TH STREET MIAMI, FL 33174	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PEREZ, NOELIA 10813 S.W. 6TH STREET MIAMI, FL 33174	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 life empowered.		
<b>SIGNATURE:</b> <i>Candido Fraga</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>4-15-08</b> <small>Date Daytime Phone #</small>



04152008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>65-0322710</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

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05/06/08-80007-001 70.00

**DO NOT WRITE  
IN THIS SPACE**