

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 31, 2006 8:00 am**  
**Secretary of State**

08-31-2006 90003 026 \*\*\*\*61.25

**DOCUMENT # N04639**

1. Entity Name

**LAS BRISAS TOWNHOUSE APARTMENTS  
CONDOMINIUM-NO. 3 ASSOCIATION, INC.**



Principal Place of Business

**1300 W. 46TH ST.  
HIALEAH FL 33012  
US**

Mailing Address

**4445 WEST 16 AVE  
SUITE 308  
HIALEAH FL 33012  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2665942**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MORENO, MARICELA  
1330 W 46TH ST # 1  
HIALEAH FL 33012**

Name

**TORANZO, NORMA**

Street Address (P.O. Box Number is Not Acceptable)

**1330 W 46 St # 10**

City

**HIALEAH**

**FL**

Zip Code  
**33012**

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]*

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

(NOTE: Registered Agent signature required when reinstating)

8-25-06

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**P  
MORENO, MARICELA  
1300 W 46 ST, # 1  
HIALEAH FL 33012** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VPD  
HERNANDEZ, LAIKEL  
1330 W 46 ST, # 16  
HIALEAH FL 33012** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**SD  
SANCHEZ, ABRAHAM  
5945 NW 113 TERR  
HIALEAH FL 33012** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**TD  
TOPANZO, NORMA  
1310 W 46 ST, # 10  
HIALEAH FL 33012** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PD  
HERNANDEZ, LAIKEL  
1330 W 46 St # 16  
HIALEAH, FL 33012** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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]*

8-25-06

305-823-1201