## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001847

FILED Apr 07, 2009 Secretary of State

Entity Name: VISTA TRACE 4 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

15460 SW 284 STREET C/O MIAMI MANAGEMENT HOMESTEAD, FL 33033 14275 SW 142 AVE

MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

C/O MIAMI MANAGEMENT 14275 SW 142 AVE MIAMI, FL 33186

FEI Number: 20-4085488 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 TRILAY, CARLOS A
 TRIAY, CARLOS A

 3750 NW 87 AVE
 2301 NW 87 AVE

 SUITE #100
 501

 MIAMI, FL 33178 US
 DORAL, FL 33172 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: CARLOS TRIAY 04/07/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

e: PD ( ) Delete Title: PD (X) Change( ) Addition

 Name:
 JULIAO, EDUARDO
 Name:
 JULIAO, EDUARDO

 Address:
 14275 SW 284 STREET
 Address:
 14275 SW 142 AVE

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33186

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 FAIBER, ALBA
 Name:
 FAIBER, ALBA

 Address:
 14275 SW 284 STREET
 Address:
 14275 SW 142 AVE

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33186

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 FLOREZ, JUÁN CARLOS
 Name:
 FLOREZ, JUÁN CARLOS

 Address:
 15460 SW 284 STREET
 Address:
 14275 SW 142 AVE

 City-St-Zip:
 HOMESTEAD, FL
 City-St-Zip:
 MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify 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: EDUARDO JULIAO PD 04/07/2009