

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2006 8:00 am
Secretary of State

05-31-2006 90008 022 ****61.25

DOCUMENT # N05000008362	
1. Entity Name DORAL EDGE WEST CONDOMINIUM NO. 1 ASSOCIATION INC.	

Principal Place of Business 11030 N. KENDALL DRIVE SUITE 100 MIAMI, FL 33176	Mailing Address 11030 N. KENDALL DRIVE SUITE 100 MIAMI, FL 33176
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2. Principal Place of Business 5981-5993 MIAMI HAZAR	3. Mailing Address C/O PENINSULA REAL ESTATE
Suite, Apt. #, etc.	Suite, Apt. #, etc. 2026 S.W. 1st #6
City & State MIAMI FL	City & State MIAMI
Zip 33178	Country Miami Dade
Zip 33135	Country MIAMI DADE



01272006 Chg-NP CR2E037 (11/05)

4. FEL Number 242184365	Applied For ☐	Not Applicable ☐
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent VALLE, MARIA F ESQ. 3750 N.W. 87 AVENUE UNIT 100 DORAL, FL 33178	
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7. Name and Address of New Registered Agent Name Carlos de la Rionda Street Address (P.O. Box Number is Not Applicable) C/O PENINSULA REAL ESTATE, INC 2026 S.W. 1st #6 City MIAMI FL Zip Code 33135	
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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 <u><i>Carlos de la Rionda</i></u> 5/28/2006 Signature, by entity, printed name of registered agent and the applicable (NOTE: Registered Agent signature required when requesting) (DATE)	
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Filing 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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILLAR, GABRIEL 11030 N. KENDALL DRIVE #100 MIAMI, FL 33176 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VASQUEZ, JOHANNY 11030 N. KENDALL DRIVE #100 MIAMI, FL 33176 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PALLIN, RAMON 11030 N. KENDALL DRIVE #100 MIAMI, FL 33176 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 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: <u><i>G. Villar</i></u> President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	305-642-5003 <i>[Signature]</i>