

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008531

FILED
Jan 06, 2010
Secretary of State

Entity Name: DORAL PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6010 NW 99 AVENUE
UNIT 100
DORAL, FL 33178

New Principal Place of Business:

6010-6020-6030 NW 99 AVENUE
DORAL, FL 33178

Current Mailing Address:

PO BOX 228055
MIAMI, FL 33222

New Mailing Address:

PO BOX 667808
MIAMI, FL 33166

FEI Number: 23-1302661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MP PROPERTY MANAGEMENT INC.
8390 NW 53 STREET
SUITE 313
DORAL, FL 33166 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MURATI, JAIME
Address: 6020 NW 99 AVENUE UNIT 200
City-St-Zip: DORAL, FL 33178

Title: T
Name: ESCORCIA, ALFONSO
Address: PO BOX 171925
City-St-Zip: HIALEAH, FL 33017

Title: S
Name: ARCHILLA, MARIANELA
Address: 6010 NW 99 AVENUE UNIT 177
City-St-Zip: DORAL, FL 33178

Title: VP
Name: GEOFREY, MIRTA
Address: 6020 NW 99 AVENUE UNIT 215
City-St-Zip: DORAL, FL 33178

Title: VP
Name: QUINTERO, RICARDO
Address: 605162 SW 173 AVENUE
City-St-Zip: MIRAMAR, FL 33029

I hereby 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 all other like empowered.

SIGNATURE: JAIME MURATI

P

01/06/2010

Electronic Signature of Signing Officer or Director

Date