2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009250

FILED Apr 26, 2006 Secretary of State

Entity Name: GABLES GATE HOMEOWNERS ASSOCIATION, INC.

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

3011 SW 11 STREET 2736 SW 15 STREET MIAMI, FL 33135 MIAMI, FL 33145

Current Mailing Address: New Mailing Address:

3011 SW 11 STREET J FERNANDEZ / GABLES GATE HOMEOWNERS ASSOC MIAMI. FL 33135 PO BOX 351202

MIAMI, FL 33135 PO BOX 351202 MIAMI, FL 33135

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

 VELEZ, ISRAEL JR.
 FERNANDEZ, JOSE A

 3011 SW 11 STREET
 2736 SW 15 STREET

 MIAMI, FL 33135 US
 MIAMI, FL 33145 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: JOSE A. FERNANDEZ 04/26/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: VELEZ, ISRAEL JR. Name: JOSE, FERNANDEZ A

Address: 3011 SW 11 STREET Address: 2736 SW 15 STREET
City-St-Zip: MIAMI, FL 33135 City-St-Zip: MIAMI, FL 33145

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

 Name:
 FERNANDEZ, JOSE
 Name:
 MENDOZA, JULIA

 Address:
 2736 SW 15 STREET
 Address:
 3011 SW 11 STREET

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33145

Title: S () Delete Title: () Change () Addition

 Name:
 BLANCO, GRACE
 Name:

 Address:
 2765 SW 14 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:

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

 Name:
 HERNANDEZ, REINOL
 Name:
 LAMA, LORENA

 Address:
 2901 SW 14 STREET
 Address:
 3161 SW 12 STREET

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33135

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSE A. FERNANDEZ P 04/26/2006