

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 02, 2007
Secretary of State

DOCUMENT# N05000011976

Entity Name: ESPERANZA PLACE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1225 WEST 30TH STREET
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**PO BOX 160718
HIALEAH, FL 33012**New Mailing Address:****FEI Number:** 90-0307108**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FLORIDAS PROPERTY MANAGMENT GROUP, CORP.
5979 NW 151 STREET
#101
MIAMI LAKES, FL 33014 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: PD () Delete
Name: CAMUS, MICHAEL
Address: 5979 NW 151 STREET #101
City-St-Zip: MIAMI LAKES, FL 33014

Title: VPD () Delete
Name: DEL MONTE, ERNESTO
Address: 5979 NW 151 STREET #101
City-St-Zip: MIAMI LAKES, FL 33014

Title: STD () Delete
Name: BERL, CARLOS
Address: 5979 NW 151 STREET #101
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOUZO, ELIZABETH
Address: 5979 NW 151 STREET #101
City-St-Zip: MIAMI LAKES, FL 33014

Title: SVPD (X) Change () Addition
Name: ROCA, ELIZABETH
Address: 5979 NW 151 STREET #101
City-St-Zip: MIAMI LAKES, FL 33014

Title: TD (X) Change () Addition
Name: TORRES, JUDITH
Address: 5979 NW 151 STREET #101
City-St-Zip: MIAMI LAKES, FL 33014

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: ELIZABETH BOUZO

PD

10/02/2007

Electronic Signature of Signing Officer or Director

Date