

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 27, 2010
Secretary of State

DOCUMENT# N06000002211

Entity Name: LAS BRISAS DEL CARIBE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**7130 W 11 CT.
HIALEAH, FL 33014**New Principal Place of Business:**7130 W 11 CT.
APT, # 23
HIALEAH, FL 33014**Current Mailing Address:**C/O THE CONTINENTAL GROUP, INC.
5805 BLUE LAGOON DR., SUITE 310
MIAMI, FL 33126 US**New Mailing Address:****FEI Number:** 20-4927895 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DANIEL, JOHN P ESQ
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 US**Name and Address of New Registered Agent:**RUIZ, ALEXANDER ESQ
16400 NW 59 AVENUE
MIAMI LAKES, FL 33014 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: ALEXANDER RUIZ

07/27/2010

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** PD
Name: RUIZ, ALEXANDER
Address: 16400 NW 59 AVENUE
City-St-Zip: MIAMI LAKES, FL 33014**Title:** VPD
Name: MUNOZ, DANIELLE
Address: 16400 NW 59 AVENUE
City-St-Zip: MIAMI LAKES, FL 33014**Title:** D
Name: ALDAMA, CAMILO
Address: 16400 NW 59 AVENUE
City-St-Zip: MIAMI LAKES, FL 33014**Title:** D
Name: HERNANDEZ, BEATRIZ
Address: 7190 W. 11 COURT, # 1
City-St-Zip: HIALEAH, FL 33014

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: ALEXANDER RUIZ

PRES

07/27/2010

Electronic Signature of Signing Officer or Director_____
Date