

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002211

FILED
Jan 31, 2011
Secretary of State

Entity Name: LAS BRISAS DEL CARIBE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7130 W 11 CT.
APT, # 23
HIALEAH, FL 33014

New Principal Place of Business:

C/O THE CONTINENTALGROUP, INC
5805 BLUE LAGOON DRIVE, STE. 310
MIAMI, FL 33126 US

Current Mailing Address:

C/O THE CONTINENTAL GROUP, INC.
5805 BLUE LAGOON DR., SUITE 310
MIAMI, FL 33126 US

New Mailing Address:

C/O THE CONTINENTALGROUP, INC
5805 BLUE LAGOON DRIVE, STE. 310
MIAMI, FL 33126 US

FEI Number: 20-4927895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, ALEXANDER ESQ
16400 NW 59 AVENUE
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
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: 16400 NW 59 AVENUE
City-St-Zip: MIAMI LAKES, 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

PD

01/31/2011

Electronic Signature of Signing Officer or Director

Date