

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2007 NOV 13 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N06000002897 1. Entity Name LUDLUM VILLAS WEST CONDOMINIUM ASSOCIATION, INC.		
Principal Place of Business 1310 WEST 42ND STREET MIAMI, FL 33166	Mailing Address 1310 WEST 42ND STREET MIAMI, FL 33166	



2. Principal Place of Business - No P.O. Box # _____		3. Mailing Address _____ SAME _____	
Suite, Apt. #, etc. 1750 W. 42 PL		Suite, Apt. #, etc. _____	
City & State Hialeah FL		City & State _____	
Zip 33012	Country US	Zip _____	Country _____

10242007 REIN-NP CR2E099 (1/07)

4. FEI Number 20-5077177		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GOLD, STEVE A
201 ALHAMBRA CIRCLE
SUITE 601
CORAL GABLES, FL 33134**

7. Name and Address of New Registered Agent

Name: _____
 Street Address (P.O. Box Number is Not Acceptable):
1750 WEST 42 PL
 City: **HIALEAH** FL Zip Code: **33012**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: 11/07/07
DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$61.25 After January 1, 2008, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to: Florida Department of State
---	--	--

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	JURADO, SALVADOR A	
STREET ADDRESS	6401 NORTHWEST 74TH STREET	
CITY-ST-ZIP	HIALEAH, FL 33012	
TITLE	VPSD	<input checked="" type="checkbox"/> Delete
NAME	JURADO, JOSE A JR.	
STREET ADDRESS	6401 NORTHWEST 74TH STREET	
CITY-ST-ZIP	HIALEAH, FL 33012	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	JURADO, SALVADOR A JR.	
STREET ADDRESS	6401 NORTHWEST 74TH STREET	
CITY-ST-ZIP	HIALEAH, FL 33012	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Jose Luis Perot		
STREET ADDRESS	1750 W 42 PL		
CITY-ST-ZIP	Hialeah FL 33012		
TITLE	TREASURER	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Oscar Vallerillo		
STREET ADDRESS	1754 W 42 PL		
CITY-ST-ZIP	Hialeah FL 33012		
TITLE	SECRETARY	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Justa L. Gonzalez		
STREET ADDRESS	1746 W 42ND PL		
CITY-ST-ZIP	Hialeah FL 33012		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 11/07/07
Date

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #