

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003723

FILED  
Apr 16, 2010  
Secretary of State

**Entity Name:** HIALEAH PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

199 WEST 29 STREET #9  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

199 WEST 29 STREET #9  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 20-4778156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIAZ, CARLOS M  
199 WEST 29 STREET #9  
HIALEAH, FL 33012 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:** DIAZ, CARLOS  
**Address:** 199 WEST 29 STREET #9  
**City-St-Zip:** HIALEAH, FL 33012

**Title:** VPTD  
**Name:** VENTURA, ALAIN  
**Address:** 199 WEST 29 STREET #9  
**City-St-Zip:** HIALEAH, FL 33012

**Title:** SD  
**Name:** DEL CALVO, OSCAR  
**Address:** 199 WEST 29 STREET #9  
**City-St-Zip:** HIALEAH, FL 33012

**Title:** S  
**Name:** PEREZ, JORGE M  
**Address:** 199 WEST 29 STREET #9  
**City-St-Zip:** HIALEAH, FL 33012

**Title:** T  
**Name:** PIEDRA, DANILO  
**Address:** 199 WEST 29 STREET #9  
**City-St-Zip:** HIALEAH, FL 33012

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:** CARLOS M DIAZ

P

04/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date