

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000004463

**FILED**  
**Jan 09, 2010**  
**Secretary of State**

**Entity Name:** LES FLAMANTS CONDOMINIUM ASS. INC

**Current Principal Place of Business:**

5613 W 28 AVE  
HIALEAH, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

5613 W 28 AVE  
HIALEAH, FL 33016

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CABRERA, FRANKY  
5613 W 28 AVE  
HIALEAH, FL 33016 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: CABRERA, FRANKY  
Address: 5613 W 28 AVE  
City-St-Zip: HIALEAH, FL 33016 US

Title: VP  
Name: BECERRA, MICHELLE  
Address: 5623 W 28 AVE  
City-St-Zip: HIALEAH, FL 33016 US

Title: SD  
Name: CABRERA, DAISY  
Address: 5613 W 28 AVE  
City-St-Zip: HIALEAH, FL 33016 US

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: FRANKY CABRERA

PD

01/09/2010

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

\_\_\_\_\_  
Date