

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000002246

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** LAS PALMAS DEL SOL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

605 WEST 68 STREET  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

900 W. 49TH STREET  
220  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 26-0525145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DELATORRE, CLEMENTE J  
900 W 49 STREET  
220  
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: VEGA, ORLANDO  
Address: 900 W 49 ST., SUITE 220  
City-St-Zip: HIALEAH, FL 33012

Title: FPTD  
Name: RUIZ, ALEX  
Address: 900 W 49 ST. SUITE 220  
City-St-Zip: HIALEAH, FL 33012

Title: SD  
Name: VEGA, ALEX  
Address: 900 W 49 ST. SUITE 220  
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: ORLANDO VEGA

PD

03/15/2011

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

\_\_\_\_\_  
Date