

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005946

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** FONTAINBLEAU LAKES MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

3470 NW 82ND AVENUE  
SUITE 988  
DORAL, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

3470 NW 82ND AVENUE  
SUITE 988  
DORAL, FL 33122

**New Mailing Address:**

**FEI Number:** 26-1974464

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHOJAE, MASOUD  
3470 NW 82ND AVENUE  
SUITE 988  
DORAL, FL 33122 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: DP  
Name: CRUZ, MARTA  
Address: 3470 NW 82ND AVENUE SUITE 988  
City-St-Zip: DORAL, FL 33122

Title: DT  
Name: MELENDI, CHANTEL  
Address: 3470 NW 82ND AVENUE SUITE 988  
City-St-Zip: DORAL, FL 33122

Title: DVP  
Name: CHONG, RAQUEL P  
Address: 3470 NW 82ND AVENUE SUITE 988  
City-St-Zip: DORAL, FL 33122

Title: DS  
Name: ORTIZ, JENNIFER  
Address: 990 BISCAYNE BLVD. SUITE 1501  
City-St-Zip: MIAMI, FL 33132

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: CHANTEL MELENDI

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04/19/2011

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

\_\_\_\_\_  
Date