

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003645

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** AQUA ISLES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1560 SOUTH DIXIE HWY STE 211  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

135 SAN LORENZO AVENUE, SUITE #740  
CORAL GABLES, FL 33146

**Current Mailing Address:**

1560 SOUTH DIXIE HWY STE 211  
CORAL GABLES, FL 33146

**New Mailing Address:**

135 SAN LORENZO AVENUE, SUITE #740  
CORAL GABLES, FL 33146

**FEI Number:** 26-2849251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIAZ, RAD  
C/O MIAMI MANAGEMENT  
1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323 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: EISENACHER, HAROLD A  
Address: 135 SAN LORENZO AVENUE, SUITE #740  
City-St-Zip: CORAL GABLES, FL 33146

Title: DVT  
Name: SOL, MARIA  
Address: 135 SAN LORENZO AVENUE, SUITE #740  
City-St-Zip: CORAL GABLES, FL 33146

Title: DVT  
Name: LARA, FRANCISCO  
Address: 135 SAN LORENZO AVENUE, SUITE #740  
City-St-Zip: CORAL GABLES, FL 33146

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:** HAROLD EISENACHER

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04/14/2011

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

\_\_\_\_\_  
Date