2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N08269

TI FILED
Sep 15, 2006
Secretary of State

Entity Name: THE PORTICOS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

15439 SW 80 STREET #105

MIAMI, FL 33193 US

Current Mailing Address: New Mailing Address:

15439 SW 80 STREET 12350 SW 132ND CT. #105 #114 MIAMI, FL 33193 US MIAMI, FL 33186 US

FEI Number: 65-0433845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RODRIGUEZ, OSVALDO

15439 SW 80 STREET

#105

MIAMI, FL 33193 US

ALLIED PROPERTY GROUP, INC.

12350 SW 132 CT.

#114

MIAMI, FL 33186 US

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: GABRIEL ALVAREZ, PROPERTY MANAGER 09/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Delete Title: () Change () Addition Name: SANTOS, ZORAIDA Name:

Address: 14833 SW 80 ST. #202 Address:
City-St-Zip: MIAMI, FL 33193 City-St-Zip:

Title: SD () Delete Title: PD (X) Change () Addition Name: RODRIGUEZ, OSVALDO Name: RODRIGUEZ, OSVALDO

 Address:
 15439 SW 80 ST. #105
 Address:
 15439 SW 80 ST. #105

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:
 MIAMI, FL 33193

Title: VPD () Delete Title: VP&S (X) Change () Addition

 Name:
 APARICIO, LUIS
 Name:
 APARICIO, LUIS

 Address:
 14829 SW 80 ST. # 104
 Address:
 14829 SW 80 ST. # 104

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:
 MIAMI, FL 33193

Title: TD () Delete Title: () Change () Addition

SANCHEZ, CARIDAD Name:
14833 SW 80 ST. #104 Address:
MIAMI, FL 33193 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: OSVALDO RODRIGUEZ PD 09/15/2006