2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N15044

1. Entity Name

LAGO BELLO #1 TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

5788-10/5764-86 WEST 26TH AVE HIALEAH, FL 33016 US

Mailing Address

C/O AMERICAN MANAGEMENT AND REALTY, INC. 2011 W 62 ST

HIALEAH, FL 33016 US

FILED Mar 13, 2007 8:00 am Secretary of State

03-13-2007 90018 043 ****61.25

40034958



02282007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0232998

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and	Address	of Curre	nt Regist	ered Agent

AMERICAN MANAGEMENT & REALTY, INC 2011 W 62 ST HIALEAH, FL 33016

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8. The above the obligat	named entity submits this statement for the discussions of registered agent.	ne purpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DI	RECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IGLEASIS, ALEX 5808 WEST 26 AVE) 790 6 HIALEAH, FL 33016	vest 26 AVE	-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HERNANDEZ, BESSY 5792 WEST 26 AVE HIALEAH, FL 33016						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARTIN, CASOLA 5794 W 26 AVE HIALEAH, FL 33016		DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
					9. Florida Statutes. I further certify that the information		

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Horida Statutes. I further certify that the information indicated on this report is rupper lies true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #