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Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000005028 (6)
1. Corporation Name
LOS ARBOLES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 1900 WEST 68TH STREET HIALEAH FL 33014
Mailing Address: 1900 WEST 68TH STREET HIALEAH FL 33014

3. Date Incorporated or Qualified: 11/02/1993
4. FEI Number: 65-0487339
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 same
2a. Mailing Address: 26 same
Suite, Apt. #, etc.: 22
City & State: 23
Zip: 24 Country: 25 Miami-Dade
City & State: 27
Zip: 28 Country: 29 Miami-Dade

9. Name and Address of Current Registered Agent
SKRLD, INC
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name: Robert H. Yaffe
82 Street Address (P.O. Box Number is Not Acceptable): 767 Arthur Godfrey Road
83
84 City: Miami Beach FL 85 Zip Code: 33140

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE: *Robert H. Yaffe* (Robert H. Yaffe) DATE: 3/29/98

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	FERNANDEZ, ORESTES F	
STREET ADDRESS	1900 W. 68TH ST G-301	
CITY-ST-ZIP	HIALEAH FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	ANDREU, RENE	
STREET ADDRESS	1900 W 68TH ST B-402	
CITY-ST-ZIP	HIALEAH FL	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	BULA, MARCUS	
STREET ADDRESS	1900 W 68TH ST H-304	
CITY-ST-ZIP	HIALEAH FL	
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	FEBRES, HERNAN	
STREET ADDRESS	1900 W 68TH ST. C-201	
CITY-ST-ZIP	HIALEAH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DV	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Fernandez, Orestes F.	
1.3 STREET ADDRESS	1900 W 68th St. G-301	
1.4 CITY-ST-ZIP	Hialeah, FL 33014	
2.1 TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Arochena, Rodolfo	
2.3 STREET ADDRESS	1900 W 68th St. D-301	
2.4 CITY-ST-ZIP	Hialeah, FL 33014	
3.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Amaya, Ricardo	
3.3 STREET ADDRESS	1900 W 68th St. E-304	
3.4 CITY-ST-ZIP	Hialeah, FL 33014	
4.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Touron, Jesus	
4.3 STREET ADDRESS	1900 W 68th St D-101	
4.4 CITY-ST-ZIP	Hialeah, FL 33014	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Fernandez, Maria L.	
5.3 STREET ADDRESS	1900 W 68th St. B-302	
5.4 CITY-ST-ZIP	Hialeah, FL 33014	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Orestes F. Fernandez* Orestes F. Fernandez April 16th, 1998 (305)8275622

CP2E037 (10/97)