


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90013 024 ****61.25

DOCUMENT # N93000005028

1. Entity Name
LOS ARBOLES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address

1900 WEST 68TH CONDO OFFICE HIALEAH FL 33014 **1900 WEST 68TH CONDO OFFICE HIALEAH FL 33014**



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For / Not Applicable

65-0487339 Applied For / Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

 \$8.75 Additional Fee Required

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent

TOURON, JESUS
1900 WEST 68TH STREET
SUITE D-101
HIALEAH FL 33014

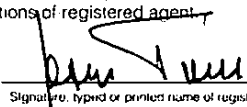
7. Name and Address of New Registered Agent

Name **Jesus Touron**

Street Address (P.O. Box Number is Not Acceptable)
1900 W 68 ST Apt # D-101

City **Hialeah** FL Zip Code **33014**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **3-8-06**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when consolidating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	PADRON, IFRAIN J	
STREET ADDRESS	1900 W 68TH ST I-303	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE	DV	<input type="checkbox"/> Delete
NAME	GONZALEZ, MARTIN	
STREET ADDRESS	1900 W 68TH ST G-309	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE	SD	<input type="checkbox"/> Delete
NAME	TOURON, JESUS	
STREET ADDRESS	1900 WEST 68TH ST. APTO D-101	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HARDEN, FRANCIS L	
STREET ADDRESS	1900 WEST 68TH STREET SUITE A-305	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE	D	<input type="checkbox"/> Delete
NAME	RODRIGUEZ, JUAN C	
STREET ADDRESS	1900 W 68TH ST A-206	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Padron, Ifrain J.	
STREET ADDRESS	1900 W 68TH ST I-303	
CITY-ST-ZIP	Hialeah, FL. 33014	
TITLE	DV	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Gonzalez, Martin	
STREET ADDRESS	1900 W 68ST G-309	
CITY-ST-ZIP	Hialeah, FL. 33014	
TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Touron Jesus	
STREET ADDRESS	1900 W 68 ST D-101	
CITY-ST-ZIP	Hialeah, FL. 33014	
TITLE	T.D.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Harden, Francis L.	
STREET ADDRESS	1900 W 68 ST A-305	
CITY-ST-ZIP	Hialeah, FL. 33014	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rodriguez, Juan C.	
STREET ADDRESS	1900 W 68 ST A-206	
CITY-ST-ZIP	Hialeah, FL. 33014	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  (President)  DATE **3-8-06**