

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jul 13, 2009
Secretary of State**

DOCUMENT# N93000005028

Entity Name: LOS ARBOLES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1900 WEST 68TH
CONDO OFFICE
HIALEAH, FL 33014**New Principal Place of Business:****Current Mailing Address:**1900 WEST 68TH
CONDO OFFICE
HIALEAH, FL 33014**New Mailing Address:****FEI Number:** 65-0487339**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HARDEN, FRANCIS
1900 WEST 68TH STREET
A305
HIALEAH, FL 33014 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: DV () Delete
Name: SUAREZ, ALINA
Address: 1900 W 68TH ST I-302
City-St-Zip: HIALEAH, FL 33014

Title: PD () Delete
Name: CASTILLO, IRAN
Address: 1900 W 68TH ST E-103
City-St-Zip: HIALEAH, FL 33014

Title: SD () Delete
Name: HARDEN, FRANCIS
Address: 1900 WEST 68TH ST. APTO A305
City-St-Zip: HIALEAH, FL 33014

Title: TD () Delete
Name: FONTAN, ROBERTO
Address: 1900 W 68 ST APT. H401
City-St-Zip: HIALEAH, FL 33014

Title: D () Delete
Name: LOPEZ, WILLIAM
Address: 1900 W 68 ST APT. E108
City-St-Zip: HIALEAH, FL 33014 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SUAREZ, ALINA
Address: 1900 W 68TH ST I-302
City-St-Zip: HIALEAH, FL 33014

Title: D (X) Change () Addition
Name: RODRIGUEZ, MARTIN R
Address: 1900 W 68TH ST F-202
City-St-Zip: HIALEAH, FL 33014

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: LOPEZ, WILLIAM
Address: 1900 W 68 ST APT. E108
City-St-Zip: HIALEAH, FL 33014 US

I hereby certify that the information supplied with this filing does not qualify 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: ALINA SUAREZ

PD

07/13/2009

Electronic Signature of Signing Officer or Director

Date