

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**Oct 22, 2012**  
**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:**

CEREIJO, ANTONIO  
1900 WEST 68TH STREET  
APT A-401  
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: D  
Name: OROPESA, ELIAS  
Address: 1900 W 68TH ST D-105  
City-St-Zip: HIALEAH, FL 33014 US

Title: S  
Name: RODRIGUEZ, KATTY  
Address: 1900 W 68TH ST D-301  
City-St-Zip: HIALEAH, FL 33014 US

Title: PD  
Name: CEREIJO, ANTONIO  
Address: 1900 WEST 68TH STREET, APT A-401  
City-St-Zip: HIALEAH, FL 33014 US

Title: TD  
Name: RODRIGUEZ, MARLON  
Address: 1900 W 68 ST APT. F-301  
City-St-Zip: HIALEAH, FL 33014 US

Title: VP  
Name: SEGURA, MARTHA  
Address: 1900 W 68 ST APT. A-406  
City-St-Zip: HIALEAH, FL 33014 US

I hereby 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 all other like empowered.

SIGNATURE: ANTONIO CEREIJO

PD

10/22/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date