2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002988

FILED Apr 28, 2009 Secretary of State

Entity Name: LA PLAYA DE VARADERO IV CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 18801 COLLINS AVENUE SUNNY ISLES, FL 33169 **Current Mailing Address: New Mailing Address:** 8500 W FLAGLER STREET MIAMI, FL 33144 FEI Number: 65-0606431 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HERNANDEZ & TACORONTE CPA 8500 FLAGLER ST, SUITE B 208 MIAMI, FL 33144 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LUIS. MAGDALENA Name: Name: 6561 W. 11TH CT. Address: Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: CORDERO, CARLOS Name: Address: 4905 SW 88TH CT Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: () Delete Title: () Change () Addition TROJILLO, JOSE Name: Name: 8530 SW 128TH STREET Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: VD Title: () Change () Addition () Delete ROIG, MARIA Name: Name: 1990 W. 56 ST., 1112 Address: Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: Title: () Delete () Change () Addition ALVAREZ, OLGA Name: Name: 514 NW 25TH CT Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip:

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: CORDERO CARLOS PD 04/28/2009