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Secretary of State
04-25-2005 90214 027 ****70.00

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

20042824

DOCUMENT # N99000001088

1. Entity Name
PALM CREST VILLAS CONDOMINIUM ASSOCIATION, INC.

04112005 Chg-NP CR2E037 (10/03)

Principal Place of Business	Mailing Address
~~C/O THE CONTINENTAL GROUP LTD~~ ~~11981 S.W. 144 CT STE 201~~ MIAMI, FL 33186	~~11981 S.W. 144 CT STE 201~~ ~~MIAMI, FL 33186~~
2. Principal Place of Business C/O L+B PROPERTY MGT. Suite, Apt. #, etc. 11980 SW 144 CT #203 City & State MIAMI FL Zip 33186 Country USA.	3. Mailing Address 11980 SW 144 CT Suite, Apt. #, etc. SUITE 203 City & State MIAMI FL Zip 33186 Country USA

4. FEI Number 65-0901912 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PAIGE, ROBERT ESQ. 9500 SOUTH DADELAND BLVD. SUITE 550 MIAMI, FL 33156	Name: Lillie Gil, C.A.M. Street Address (P.O. Box Number is Not Acceptable): 11980 SW 144 Ct. #203 City: MIAMI FL Zip Code: 33186.

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: Lillie Gil, CAM. 4-18-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VARONA, JOSE 9001 SW 94 STREET # 116 MIAMI, FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORANTES, RICARDO 9001 SW 94 St. #104 MIAMI FL 33176	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PALACIO, DANIEL 9001 SW 94 STREET # 116 MIAMI, FL 33176	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HERNANDEZ, HERNAN 9001 SW 94 STREET # 207 MIAMI, FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TIRSE, ALEXANDER 9001 SW 94 STREET # 111 MIAMI, FL 33176	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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: Jose Varona, Pres. 4-18-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #