

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000062886

FILED
Sep 05, 2008
Secretary of State

Entity Name: AZUL AT FONTAINEBLEAU CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7655 NW 50 STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

7655 NW 50 STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number: 20-1032986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNLIMITED PROPERTY MANAGEMENT
7655 NW 50 STREET
MIAMI, FL 33166 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: PD () Delete
Name: SOCARRAS, RICK
Address: 8251 NW 8TH ST
City-St-Zip: MIAMI, FL 33126

Title: TD () Delete
Name: FLORES, RAUL
Address: 8251 NW 8TH ST
City-St-Zip: MIAMI, FL 33126

Title: SD () Delete
Name: LEDESMA, MARIA
Address: 8251 NW 8TH ST
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SEIPLAX, DAX MIKAEL
Address: 8251 NW 8TH ST
City-St-Zip: MIAMI, FL 33126

Title: TD (X) Change () Addition
Name: CASTRO METZ, JOSEFA
Address: 8251 NW 8TH ST
City-St-Zip: MIAMI, FL 33126

Title: V/SD (X) Change () Addition
Name: SOSA, JOSE A
Address: 8251 NW 8TH ST
City-St-Zip: MIAMI, FL 33126

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAX MIKAEL SELPLAX

PD

09/05/2008

Electronic Signature of Signing Officer or Director

Date