

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000100200

FILED  
Mar 14, 2012  
Secretary of State

Entity Name: CITA DEL CONDOMINIUM APT 401 Y 502, INC

**Current Principal Place of Business:**

102 SW 6 AVE UNIT 401 AND UNIT 502  
MIAMI, FL 33130

**New Principal Place of Business:**

2141 SW 1ST STREET  
110  
MIAMI, FL 33135 US

**Current Mailing Address:**

102 SW 6 AVE UNIT 401 AND UNIT 502  
MIAMI, FL 33130

**New Mailing Address:**

2141 SW 1ST STREET  
110  
MIAMI, FL 33135 US

FEI Number: 45-3857495

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BONANSEA, LUCAS  
102 SW 6 AVE UNIT 401 AND UNIT 502  
MIAMI, FL 33130 US

**Name and Address of New Registered Agent:**

BONANSEA, LUCAS  
2141 SW 1ST STREET  
110  
MIAMI, FL 33135 US

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: LUCAS BONANSEA

03/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BONANSEA, HUGO  
Address: 2141 SW 1ST STREET STE 110  
City-St-Zip: MIAMI, FL 33135 US

Title: V  
Name: PAVAN, MARIA C  
Address: 2141 SW 1ST STREET STE 110  
City-St-Zip: MIAMI, FL 33135 US

Title: D  
Name: BONANSEA, LUCAS  
Address: 2141 SW 1ST STREET STE 110  
City-St-Zip: MIAMI, FL 33135 US

Title: D  
Name: BONANSEA, MARIA F  
Address: 2141 SW 1ST STREET STE 110  
City-St-Zip: MIAMI, FL 33135 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HUGO BONANSEA

P

03/14/2012

Electronic Signature of Signing Officer or Director

Date