1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 736000

1. Corporation Name

BOHEME CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1075 WEST 68TH STREET Mailing Address

1075 WEST 68TH STREET HIALEAH FL 33014

FILED Mar 11, 1999 8:00 am § Secretary of State

03-11-1999 90009 014 ****61.25



HIALEAH FL 33	1014	HIALEAH FL 33014					
2. Principal Pl	lace of Business	2a. Mailing Address	Mailing Address		3. Date Incorporated or Qualifed 06/01/1976		
21		26			4. FEI Number Applied For		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			FO 0470000	Applicable	
22		City & State			\$8.75 A		
City & State		28			5. Certificate of Status Desired Fee Rec		
23] Zip	Country	Zip	Country	,	6. Election Campaign Financing S5.00 N	/lav Be	
24	25	<u> </u>	30		Trust Fund Contribution Added to	- 1	
24	9. Name and Address of Curren				10. Name and Address of New Registered Agent		
			81	Name		'	
VILLAMIL, ROSENDO			82 Street Address (P.O. Box Number is Not Acceptable)				
1075 W 68							
#220			83		· '	ļ	
HIALEAH F	FL 33014		84	City	■ 85 Zip C	ode	
				1	FL		
office or n agent. I a	to the provisions of Sections 617.050, registered agent, or both, in the State im familiar with, and accept the obligat	of Florida. Silon chande was authu	nizeu ov	LING COLDS	d corporation submits this statement for the purpose of changing its reporation's board of directors. I hereby accept the appointment as reg	egistered istered	
SIGNATURE	Signature, typed or printed name of registered ager	t and title if applicable. (NOTE: Regi	istered Age	nt signature n	required when reinstating) DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
TITLE	DP	☐ DELETE	1.1 TITLE		PP WILLBAMIL Rosando SUITE 22	☐ Addition	
NAME	WILLAMIL, ROSENDO		1.2 NAME		VILLAMIL KOSANAO	, l	
STREET ADDRESS	1075 W 68 ST SUITE 220	1.3 ST		T ADDRESS	1075 68 31 3411620		
CITY-ST-ZIP	HIALEAH FL 33014			ST-ZIP	HIMEAH, PL 33019		
TITLE	DVP	☐ DELETE 2.1 TR			☐ Change	☐ Addition	
NAME	Lopez, Hugo		2.2 NAME			1	
STREET ADDRESS	1075 W 68 ST SUITE 209			T ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33014			ST-ZIP	□Change	Addition	
TITLE	DT	☐ DELETE	3.1 TITLE		Criange		
NAME	GONZALEZ, PEDRO		3.2 NAME	1		,	
STREET ADDRESS	1075 W 68 ST SUITE 312			TADORESS	S.		
CITY-ST-ZIP	HIALEAH FL 33014	DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP	Change	☐ Addition	
TITLE	DS HIANI		4.1 IIILE		J. Sittings		
NAME	ALFONSO, JUAN 1075 W 68TH #217		_	T ADDRESS	8	Ī	
STREET ADDRESS	HIALEAH FL 33014		4.4 CITY-5			·	
CITY-ST-ZIP TITLE	V	□ DELETÉ	5.1 TITLE	DI-EIF	Change	Addition	
NAME	BALAGUER, CARLOS		5.2 NAME			ļ	
STREET ADDRESS	ACTE ME COTIL CEDEET #000		5.3 STREE	ET ADDRESS	s	}	
CITY-ST-ZIP	HIALEAH FL 33014		5.4 CITY-5	ST-ZIP			
TITLE	V	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition	
NAME	BARRIOS, BIENVENIDO	ł	6.2 NAME		, , , , , , , , , , , , , , , , , , ,		
STREET ADDRESS	ANTE MANAGEMENT AND		6.3 STREE	ET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33014		6.4 CITY-	ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

ATURE: COMPANY OF PRINTED NAME OF SIGNING OFFICER OR DIRECT

JI part 3-6-49

Daytime Phone #

CRZE