

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 08:00 A
Secretary of State

DOCUMENT # 737206
 1. Entity Name
INTERNATIONAL GARDENS SECTION 4 HOMEOWNERS ASSOCIATION INC.



Principal Place of Business
**2030 SW 123RD CT
 MIAMI, FL 33175**

Mailing Address
**PO BOX 941523
 MIAMI, FL 33194**

DO NOT WRITE IN THIS SPACE



03112008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0021758	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**FERNANDEZ, JORGE A
 2030 SW 123RD CT
 MIAMI FL, FL 33175**

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000858457
 04/01/08-80047-023 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FERNANDEZ, JORGE A 2030 SW 123RD CT MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOONEY, ADA 2045 SW 125 CT MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RAMOS, ISMAEL 2040 SW 123 CT MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, JESUS 12425 SW 22 TERRACE MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARTINEZ, MARIA L 1940 SW 123 CT. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Jorge A. Fernandez, Treasurer* 3/13/08 (305) 559-4566
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #