## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 16 1997 8:00am

Secretary of State

Daytime Phone # 0022811

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

740320

(7)

## MANGO HILL CONDOMINIUM ASSOCIATION NO. 1, INC.

B : 1   1   1   1				
Principal Place	or Business	Mailing Address		
P O BOX 110658		P O BOX 110658		
HIALEAH FL 33011   US		HIALEAH FL 33011-0658 US		
				3. Date incorporated or Qualified 3a. Date of Last Report 03/15/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26 Silve And H and		59-1702652 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		Certificate of Status Desired     Status Desired     Status Desired     Status Desired     Status Desired
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23	•	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	30	Florida Statutes Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
BI Name FRANCISCO MARTINEZ				
DE LA CRUZ, ALEJANDRO B2 Street Address				Address (P.O. Box Number is Not Acceptable)
	44TH TERR			1087 W 44 TOR
	49TH PLACE, STE. 515		83	
HIALEAH	1 FL 33012		84 City	85 Zip Code
44 Diverse	to the provinces of Spations 617.06	02 and 617 1509 Florida State	dos the shous samed	HIMISAH FL 33012
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar was, and accept the obligations of Section 617.6503 Policia Statutes.				
	m familiar war, and accept the oblig	gations of bection 617, 1503, 1	JOHQA Statutes.	
SIGNATURE	Signatury, typed or printed name of registered ag	ent and file if applicable. (NC	TE: Registered Agent signature	required when reinstating) DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TOTLE	PACTIOCN 7 M Change Addition
NAME	ORTEGA, JUAN OCTAVIO		1.2 NAME	FRANCISCO MARTINEZ 1087 W HU TER
STREET ADDRESS	1082 W 44TH ST		1.3 STREET ADDRESS	1087 W 44 TER
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-ST-ZIP	CONSTANTING CORDERO Addition
TOTLE	TD	☐ DELETE	2.1 TIYLE	CONSTANTING CORRECTION
NAME	de la cruz, alejandro		2.2 NAME	4445 W 17 AVE
STREET ADDRESS	1075 W 44TH TERR		2.3 STREET ADDRESS	• • •
CITY-ST-ZIP	HIALEAH FL	☐ DELETE	2. 4 CITY - ST - ZIP	HIMIS AM, FL 33012
TITLE	SD DAT OLADVO	☐ pereie	3.1 TITLE	PINITICAL DUICH LOPIDACES X ***
NAME	DE DAZ, GLADYS		3.2 NAME	4419 W IOLANG
STREET ADDRESS	4437 W 11 AVE HIALEAH FL 33012		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	HAIZAH FL 33012
CITY-ST-ZIP TITLE	THALCAITTE SSOTE	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-S1-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	,
STHEET ADDRESS			5.3 STREET ADDRESS	
CITY - ST - ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	·
CITY-ST-ZIP		The state of the s	6.4 CITY-ST-ZIP	
14. I do hereb informatio	by certify that the information supplied in indicated on this annual report or	ed with this tiling does not qua supplemental annual report is	ality for the exemption s true and accurate and	tated in Section 119.07(3)(i), Florida Statutes. I further certify that the that my signature shall have the same legal effect as if made under oath; that
1 am an o	fficer or director of the corporation of Block 12 or Block 13 channed	or the receiver or trustee empo	wered to execute this r	eport as required by Chapter 617, Florida Statutes; and that my name