

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90168 025 ****61.25

DOCUMENT # 746205

1. Entity Name

MANGO HILL CONDOMINIUM ASSOCIATION No. 10, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3740 West 9 Way

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 440067

Suite, Apt. #, etc.

City & State

Hialeah, Fl

Zip

33012

Country

City & State

Miami, Fl.

Zip

33144

Country

4. FEI Number

592120947

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

LUIS HERNANDEZ

Street Address (P.O. Box Number is Not Acceptable)

11890 SW 8 Street, Suite 100

City

Miami

FL

Zip Code
33184

**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.

SIGNATURE

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

04/11/03

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Emelia S. Hernandez 3740 West 9 Way Hialeah, Fl. 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/T/D Consuelo Rivas 946 West 37 Terrace Hialeah, Fl. 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Pablo Santiago 3830 West 9 Way Hialeah, Fl. 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Consuelo Rivas Pablo Santiago Emelia S. Hernandez 4-11-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date