

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

AMENDED

DOCUMENT # 746207
1. Entity Name
 MANGO HILL CONDOMINIUM ASSOCIATION NO. 12 INC.

FILED
 02 JUL 12 PM 3:57
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 RECEIVED
 JUL - 8 AM 11:06
 DIRECTORS OFFICE
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2. Principal Place of Business
 814 WEST 37 TERRACE
 Suite, Apt. #, etc.

3. Mailing Address
 2011 WEST 62 STREET
 Suite, Apt. #, etc.

City & State
 HIALEAH, FL.

City & State
 HIALEAH, FL.

Zip 33012 **Country** MIAMI DADE

Zip 33016 **Country** MIAMI DADE

4. FEI Number 592169455 **Applied For** **Not Applicable**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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7. Name and Address of Current Registered Agent

Name HENRY HERNANDEZ

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

2011 WEST 62 STREET

City HIALEAH **FL** **Zip Code** 33016

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FEE IS \$61.25
Initial or Amended UBR**

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

Trust Fund Contribution.

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS		
TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	CHINEA, LUIS 814 WEST 37 TERRACE HIALEAH, FL. 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE TD NAME STREET ADDRESS CITY-ST-ZIP	ALVAREZ GUERRA, BARBARA 834 WEST 37 TERRACE HIALEAH, FL. 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE SD NAME STREET ADDRESS CITY-ST-ZIP	SUAREZ, ALFREDO 3815 WEST 8 COURT HIALEAH, FL. 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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 DIRECTORS OFFICE
 [Signature]

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: Luis Chinea Luis Chinea

(305) 558-9820

CR2E037B (12/01)