

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90064 044 ****61.25

DOCUMENT # N07476 1. Entity Name MIDWAY MANSIONS TOWNHOMES CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 7989 NW 7 STREET MIAMI, FL 33126			Mailing Address PO BOX 440067 MIAMI, FL 33144 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address P.O. Box 526342 MIAMI FL.			
City & State		City & State		02102007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-2615011	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UNLIMITED PROPERTY MANAGEMENT 7655 NW 50ST MIAMI, FL 33166		7. Name and Address of New Registered Agent Name CARLOS R. SERRANO Street Address (P.O. Box Number is Not Acceptable) 1301 N.W. 89th SUITE # 203 City MIAMI FL Zip Code 33172			
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 <u>CARLOS R. SERRANO</u> 3-28-07 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALCARCEL, BARBARA 7001 SW 87 CT MIAMI, FL 33173	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	7989 NW 7ST # 20 MIAMI FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GANEM, RAFAEL 7001 SW 87 CT MIAMI, FL 33173	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	8891 MILLER DRIVE MIAMI FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD PULIDO, REGLA 3001 SW 87 CT MIAMI, FL 33173	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	7993 N.W. 7 ST. # 1 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TRELERS, BLANCA 7001 SW 87 CT MIAMI, FL 33173	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	7987 N.W. 7 ST # 0-1 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <u>Barbara Valcarcel</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				3-29-07 (305) 406-1025 Date Daytime Phone #	