

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N11459 1. Entity Name QUASAR TWIN HOMES CONDOMINIUM ASSOCIATION, INC.						FILED 05 JUN 20 AM 10: 03 TALLAHASSEE, FLORIDA	
Principal Place of Business 7953 NW 53 ST MIAMI, FL 33166 US				Mailing Address 7953 NW 53 ST MIAMI, FL 33166 US			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 59-2658310				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent DUGGER, SR, ROBERT A 7953 NW 53 ST MIAMI, FL 33166				7. Name and Address of New Registered Agent Name Fernandez, Humberto Street Address (P.O. Box Number is Not Acceptable) 5201 W. 24th Ct. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE  President Signature, typed or printed name of registered agent and date of appointment				DATE 6/7/05 (NOTE: Registered Agent signature required when reinstating)			
Amended AR is \$61.25				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 PD NAME FERNANDEZ, HUMBERTO ☐ Delete STREET ADDRESS 5201 W 24 COURT CITY-ST-ZIP HIALEAH, FL 33016	TITLE DIRECTOR ☐ Change ☒ Addition NAME Gonzalez, Jose Manuel STREET ADDRESS 5225 W. 24th Ct. CITY-ST-ZIP Hialeah, FL 33016			TITLE DIRECTOR ☐ Change ☒ Addition NAME Garces, Maria J. STREET ADDRESS 5333 W. 24th Ct. CITY-ST-ZIP Hialeah, FL 33016			
TITLE TD ☐ Delete NAME AMBROGI, OCTAVIO STREET ADDRESS 5357 WEST 24TH COURT CITY-ST-ZIP HIALEAH, FL 33016	TITLE Secretary -D ☒ Change ☐ Addition NAME Ruiz, Eva STREET ADDRESS 5364 W. 24th Ct. CITY-ST-ZIP Hialeah, FL 33016			TITLE Vice-President -D ☒ Change ☐ Addition NAME Perez, Pedro Luis STREET ADDRESS 5372 W. 24th Ct. CITY-ST-ZIP Hialeah, FL 33016			
TITLE V ☐ Delete NAME PUREZ, PEDRO L. STREET ADDRESS 5372 W 24 COURT CITY-ST-ZIP HIALEAH, FL 33016	TITLE D ☐ Delete NAME MARTGATOFF, CARMEN STREET ADDRESS 5341 N 24 CT CITY-ST-ZIP HIALEAH, FL 33016			TITLE D ☐ Delete NAME RUIZ, EVA STREET ADDRESS 5364 W 24 CT CITY-ST-ZIP HIALEAH, FL 33016			
TITLE SD ☒ Delete NAME VEGA, FRANCISCO STREET ADDRESS 5300 W 24 CT CITY-ST-ZIP HIALEAH, FL 33016	TITLE 700056513547 ☐ Change ☐ Addition NAME 06/24/05--01055--008 **\$1.25			TITLE 700056513547 ☐ Change ☐ Addition NAME 06/24/05--01055--009 **\$8.75			
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE:  President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE 6/7/05 305-512-1718 Date Daytime Phone #			