

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 18 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N11898 (6)

1. Corporation Name

MIDWAY MALL TOWNHOUSES CONDOMINIUM ASSOCIATION,
INC.

Principal Place of Business

Mailing Address

C/O ERNESTO HUERTAS
8001 N.W. 7TH STREET, UNIT 8
MIAMI FL 33126C/O ERNESTO HUERTAS
8001 N.W. 7TH STREET, UNIT 8
MIAMI FL 33126-40333. Date Incorporated or Qualified
11/05/19853a. Date of Last Report
10/10/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2814192

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KADE, PAUL M
9100 S. DADELAND BLVD.
SUITE 400
MIAMI FL 33156

81 Name

HUERTAS, ERNESTO

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

8001 NW 7th St #8

83

84 City

MIAMI

FL

85 Zip Code

33126

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 with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

01-28-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	V	☒ DELETE
NAME	HUERTAS, ERNECTO	
STREET ADDRESS	8001 N.W. 7TH ST., UNIT #8	
CITY-ST-ZIP	MIAMI FL 33126	

1.1 TITLE	PRESIDENT - D	☐ Change ☐ Addition
1.2 NAME	HUERTAS, ERNESTO	
1.3 STREET ADDRESS	8001 N.W. 7TH ST., UNIT #8	
1.4 CITY-ST-ZIP	MIAMI, FL 33126	

TITLE	SD	☒ DELETE
NAME	PRADA, ANA Y	
STREET ADDRESS	8001 N.W. 7TH ST., UNIT #15	
CITY-ST-ZIP	MIAMI FL 33126	

2.1 TITLE	VICE-PRESIDENT - D	☐ Change ☐ Addition
2.2 NAME	PRADA, ANA	
2.3 STREET ADDRESS	8001 N.W. 7TH ST., UNIT #15	
2.4 CITY-ST-ZIP	MIAMI, FL 33126	

TITLE	D	☒ DELETE
NAME	BARQUIN, ANA Y	
STREET ADDRESS	8001 N.W. 7TH ST., UNIT #18	
CITY-ST-ZIP	MIAMI FL 33126	

3.1 TITLE	TREASURE	☐ Change ☐ Addition
3.2 NAME	HUERTAS, ERNESTO	
3.3 STREET ADDRESS	8001 N.W. 7TH ST., UNIT #18	
3.4 CITY-ST-ZIP	MIAMI, FL 33126	

TITLE	D	☒ DELETE
NAME	LLERANDI, MARIA C	
STREET ADDRESS	8001 N.W. 7TH ST., UNIT #14	
CITY-ST-ZIP	MIAMI FL 33126	

4.1 TITLE	SECRETARY	☐ Change ☐ Addition
4.2 NAME	ARCOS-OLARTE, ESTEBAN	
4.3 STREET ADDRESS	8001 N.W. 7TH ST., UNIT #10	
4.4 CITY-ST-ZIP	MIAMI, FL 33126	

TITLE	D	☒ DELETE
NAME	BUSTAMANTE, HECTOR	
STREET ADDRESS	8001 N.W. 7TH ST., UNIT #12	
CITY-ST-ZIP	MIAMI FL 33126	

5.1 TITLE	DIRECTOR	☐ Change ☐ Addition
5.2 NAME	ELSA CHIN	
5.3 STREET ADDRESS	8001 N.W. 7TH ST., UNIT #20	
5.4 CITY-ST-ZIP	MIAMI, FL 33126	

TITLE	D	☒ DELETE
NAME	FREIRE, LUIS	
STREET ADDRESS	8001 N.W. 7TH ST., UNIT #1	
CITY-ST-ZIP	MIAMI FL 33126	

6.1 TITLE	DIRECTOR	☐ Change ☐ Addition
6.2 NAME	BISMARK GONZALEZ	
6.3 STREET ADDRESS	8001 N.W. 7TH ST., UNIT #9	
6.4 CITY-ST-ZIP	MIAMI, FL 33126	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-28-97

Date

(305) 265-1547

Daytime Phone # 0028492

CP2E037 (9/96)