


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 8:00 am**  
**Secretary of State**

01-31-2005 90073 010 \*\*\*\*61.25

**DOCUMENT # N15530**

1. Entity Name  
**TAMIAMI COMMERCENTER CONDOMINIUM I ASSOCIATION, INC.**



Principal Place of Business  
 9245 S.W. 157TH ST., SUITE 101  
 C/O JAMES R. STOKER  
 MIAMI, FL 33157

Mailing Address  
 9245 S.W. 157TH ST., SUITE 101  
 C/O JAMES R. STOKER  
 MIAMI, FL 33157

**50008691**



2. Principal Place of Business  
 9245 S.W. 157th, #101

3. Mailing Address  
 9245 SW 157st. #101

Suite, Apt. #, etc.  
 C/O Richard L. Stoker

City & State  
 Miami, FL

Zip  
 33157

Country  
 USA

01052005 Chg-NP CR2E037 (10/03)

4. FEI Number  
 NOT APPLICABLE

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

VALECILLO, VANNA  
 9245 S.W. 157TH ST.  
 101  
 MIAMI, FL 33157

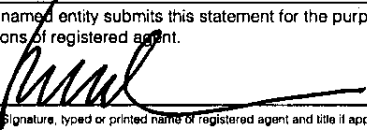
7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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  **Gus Besil** DATE **1/6/05**

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

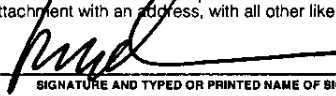
Filing Fee Is **\$61.25** Due by **May 1, 2005**

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	P VALECILO, VANNA 9245 SW 157TH ST., S-101 MIAMI, FL 33157 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Besil, Gus <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13501 SW 128 ST. #117 MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BESIL, GUS <input checked="" type="checkbox"/> Delete 13501 SW 128 ST. #117 MIAMI, FL 33186	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Valecillo, Vanna <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 16341 SW 96 Terr MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP WEBB-HARRIS, REGGIE <input type="checkbox"/> Delete 13501 SW. 128 ST. #214 MIAMI, FL 33186	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LOGREIRA, EFRAIN <input type="checkbox"/> Delete 13501 SW. 128 ST. #111-112 MIAMI, FL 33186	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBERT, CLAUDE <input type="checkbox"/> Delete 13501 SW. 128ST #212 MIAMI, FL 33186	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **Gus Besil** DATE **1/6/05** Daytime Phone # **305-232-1363**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR