


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90063 050 ****61.25

DOCUMENT # N20222					
1. Entity Name GATEWAY OFFICE/TECH CONDOMINIUM ASSOCIATION II, INC.					
Principal Place of Business 4969 S.W. 74TH COURT MIAMI, FL 33155			Mailing Address 4969 S.W. 74TH COURT MIAMI, FL 33155		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0027873	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RUIZ DE CASTILLA, CHARLES 4993 S.W. 74TH COURT MIAMI, FL 33155			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUIZ DE CASTILLA, CHARLES			NAME	
STREET ADDRESS	4993 S.W. 74TH COURT			STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33155			CITY-ST-ZIP	
TITLE	M	<input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REBULL, PATRICK			NAME	
STREET ADDRESS	4941 SW 74 COURT			STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33155			CITY-ST-ZIP	
TITLE	VD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAMERS, THIERRY S			NAME	
STREET ADDRESS	4989 S.W. 74TH COURT			STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33155			CITY-ST-ZIP	
TITLE	TD	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	REBULL, PATRICK J			NAME	BORIS ZEDAN
STREET ADDRESS	4941 S.W. 74TH COURT			STREET ADDRESS	7132 SW 47 STREET
CITY-ST-ZIP	MIAMI, FL 33155			CITY-ST-ZIP	MIAMI, FL 33155
TITLE	SD	<input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STURM, AVN			NAME	CURT STURM
STREET ADDRESS	4969 S.W. 74TH COURT			STREET ADDRESS	4969 SW 74th COURT
CITY-ST-ZIP	MIAMI, FL 33155			CITY-ST-ZIP	MIAMI, FL 33155
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, ALEX			NAME	
STREET ADDRESS	4961 S.W. 74TH COURT			STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33155			CITY-ST-ZIP	
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

40067451



04152005 Chg-NP CR2E037 (10/03)

Applied For
Not Applicable

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

SIGNATURE

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, 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

TITLE PD
NAME RUIZ DE CASTILLA, CHARLES
STREET ADDRESS 4993 S.W. 74TH COURT
CITY-ST-ZIP MIAMI, FL 33155 ☐ Delete

TITLE M
NAME REBULL, PATRICK
STREET ADDRESS 4941 SW 74 COURT
CITY-ST-ZIP MIAMI, FL 33155 ☐ Delete

TITLE VD
NAME TAMERS, THIERRY S
STREET ADDRESS 4989 S.W. 74TH COURT
CITY-ST-ZIP MIAMI, FL 33155 ☐ Delete

TITLE TD
NAME REBULL, PATRICK J
STREET ADDRESS 4941 S.W. 74TH COURT
CITY-ST-ZIP MIAMI, FL 33155 ☒ Delete

TITLE SD
NAME STURM, AVN
STREET ADDRESS 4969 S.W. 74TH COURT
CITY-ST-ZIP MIAMI, FL 33155 ☐ Delete

TITLE D
NAME RODRIGUEZ, ALEX
STREET ADDRESS 4961 S.W. 74TH COURT
CITY-ST-ZIP MIAMI, FL 33155 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BORIS ZEDAN
STREET ADDRESS 7132 SW 47 STREET
CITY-ST-ZIP MIAMI, FL 33155 ☐ Change ☒ Addition

TITLE D
NAME CURT STURM
STREET ADDRESS 4969 SW 74th COURT
CITY-ST-ZIP MIAMI, FL 33155 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/20/05 305-666-0799