

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000235

FILED
Mar 06, 2009
Secretary of State

Entity Name: POINCIANA ROYALE VILLAS CONDOMINIUM II ASSOCIATION, INC.

Current Principal Place of Business:

7512-7532 W. 20 AVE
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

PO BOX 653637
MIAMI, FL 33265

New Mailing Address:

FEI Number: 65-0761943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITE PROPERTY MANAGEMENT
11773 SW 34 ST.
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

FRANK PEREZ SIAM AND ASSOCIATES
7001 SW 87 CT
MIAMI, FL 33173 US

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.

SIGNATURE: FRANK PEREZ

03/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARRERO, SANDRO
Address: 7532 W 20TH AVE APT 203
City-St-Zip: HIALEAH, FL 33016

Title: TD () Delete
Name: OLIVA, JOSE R
Address: 7512 W 20TH AVE APT 101
City-St-Zip: HIALEAH, FL 33016

Title: D () Delete
Name: CABO, FRANCISCO
Address: 7532 W 20TH AVE APT 106
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARRERO, SANDRO
Address: PO BOX 653637
City-St-Zip: MIAMI, FL 33265

Title: TD (X) Change () Addition
Name: OLIVA, JOSE R
Address: PO BOX 653637
City-St-Zip: MIAMI, FL 33265

Title: D (X) Change () Addition
Name: CABO, FRANCISCO
Address: PO BOX 653637
City-St-Zip: MIAMI, FL 33265

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRO MARRERO

PD

03/06/2009

Electronic Signature of Signing Officer or Director

Date