

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000003205

FILED
Nov 02, 2007
Secretary of State

Entity Name: WESTVIEW VILLAS-II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7020 WEST 35 AVENUE
120
HIALEAH, FL 33018

New Principal Place of Business:

7020 WEST 35 AVENUE
115
HIALEAH, FL 33018

Current Mailing Address:

7020 WEST 35 AVENUE
120
HIALEAH, FL 33018

New Mailing Address:

P.O. BOX 4354
HIALEAH, FL 33014

FEI Number: 65-0846030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FVENTES, EDVARDO
7020 WEST 35 AVENUE
120
HIALEAH, FL 33018 US

Name and Address of New Registered Agent:

LOHUIZ, MAIRA
7020 WEST 35 AVENUE
115
HIALEAH, FL 33018 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: MAIRA LOHUIZ

11/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: LOKVIZ, MAIRA
Address: 7020 W 35 AVE 115
City-St-Zip: HIALEAH, FL 33018

Title: VP () Delete
Name: FAEDO, ENGELBERTO
Address: 7020 W 35 AVE 116
City-St-Zip: HIALEAH, FL 33018

Title: P (X) Delete
Name: FVENTES, EDVARDO
Address: 7020 W 35 AVE #120
City-St-Zip: HIALEAH, FL 33018

Title: D () Delete
Name: HERNANDEZ, GLADYS C
Address: 7020 W 35 AVE 118
City-St-Zip: HIALEAH, FL 33018

Title: S () Delete
Name: AVERHOFF, IBIS
Address: 7020 W 35 AVE 121
City-St-Zip: HIALEAH, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: LOHUIZ, MAIRA
Address: 7020 W 35 AVE 115
City-St-Zip: HIALEAH, FL 33018

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MAIRA LOHUIZ

T

11/02/2007

Electronic Signature of Signing Officer or Director

Date