NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 769653 1. Corporation Name

SEVILLA TERRACE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1034/1090 W. 79TH STREET

P.O. BOX 4067

HIALEAH FL 33014

HIALEAH FL 33014

FILED Apr 22, 1999 8:00 am § Secretary of State

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2. Principal P	lace of Business	23. Mailing Address		3. Date incorporated or Qualifed		
21 215		26 2151 CEJU	NE KOK	08/02/1983	1 2 11 5	
Suite, Apt.		Suite, Apt. #, etc.	# 20.0-	4. FEI Number 59-2400694	Applied For	
	305		# <u>-30 \</u>	33 2400034	Not Applicable	
City & Stat	11 6 71 61	City & State 28 CORAL GAS	SIFC	5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be	
24 331	34 [25] nade	29 33(34 30	DAPO	Trust Fund Contribution	Added to Fees	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
Name Yabling & Schneid P.A.						
LUIS E. VAZQUEZ 82 Street Address (P.O. Box Number is Not Acceptable),						
1072 W 79 ST 699 South rederal thishwaif						
HIALEAH FL 33014						
			84 City	A (00 O	85 Zip Code 33 020	
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 and office or registered agent, or both, in the State of Florida, Such change and office or registered agent, or both, in the State of Florida, Such change and office or registered agent, or both, in the State of Florida, Such change and office or registered agent, or both, in the State of Florida, Such change and office or registered agent, or both, in the State of Florida, Such change and office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the purpose of						
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Arnold Yabling President for Yabling & Shreid 1. A. 4/17/99						
Signature, typed or printed name of registrated agent and title if applicable. (NOTE (Registered Agent signature required wifern reinstating)						
12.	OFFICERS AND	DIRECTORS	13.	PD	Change Addition	
TITLE	VP	T. DELEIC		Allegue, Bertha	A curation	
NAME .	RISUCCI, OSCAR		1.2 NAME	1066 79 st		
STREET ADDRESS	1064 W 79TH STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33014	——————————————————————————————————————	1.4 CITY-ST-ZIP		EZChange Addition	
TITLE		☐ DELETE	2.1 TITLE	DT March	22 Change Practical	
NAME	ALLEGE, BERTA		2.2 NAME	Risucci, Oscar 1064 W 795t		
STREET ADDRESS	1066 WEST 79TH STREET	٠.٠	2.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33014		2.4 CITY-ST-ZIP	Hialenh, Fl 33014	. Change Addition	
TITLE	SD	DELETE	3.1 TITLE	Pasart, Luis	. Criange 112 Addition	
NAME	LUIS E. VAZQUEZ		3.2 NAME	1054 W 79 st	*.	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL		3.4. CITY-ST-ZIP	Hialeah, F1 33014	Change Addition	
TITLE	P	☐ DELETE	4.1 TITLE	DS Page 1	Change (12 Addition)	
NAME	FERNANDEZ, MARGARITA		4, 2 NAME	Gonzaliz, Raquel	÷	
STREET ADDRESS	1086 W 79TH STREET		4.3 STREET ADDRESS	1052 W 79 st		
CITY-ST-ZIP	HIALEAH FL 33014	— — — — — — — — — — — — — — — — — — —	4.4 CITY-ST-ZIP	Hialiah, Fl 33014	Change Addition	
TITLE	I SOUR BESTU	, DELETE	5.1 TITLE 5.2 NAME	matos, Dioslando		
NAME	ALLEGUE, BERTHA			1036 W 79 st		
STREET ADDRESS	1066 W 79TH STREET		5.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33014	TT AS I STEE	5.4 CITY-ST-ZIP 6.1 TITLE	Hialeah, Fl 33014	☐ Change ☐ Addition	
TITLE .	S	DELETE		•	Politinge Production	
NAME	AZQUEZ, LUIS E		6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		*	
CITY-ST-ZIP	GAINESVILLE FL 33014		6.4 CITY-ST-ZIP			

CITY-ST-ZIP 14. 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 annual report or suppliemental 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, with all other like empowered.

SIGNATURE:

305) 444-6757