


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 06, 2007 8:00 am**  
**Secretary of State**

02-06-2007 90011 005 \*\*\*\*61.25

<b>DOCUMENT # 729051</b>		
1. Entity Name <b>MIRAMAR TERRACE CONDOMINIUM ASSOCIATION, INC.</b>		

Principal Place of Business <b>1051 S.W. 1ST STREET MIAMI, FL 33130</b>	Mailing Address <b>1051 S.W. 1ST STREET MIAMI, FL 33130</b>
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**60013472**



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01232007 Chg-NP CR2E037 (12/06)

4. FEI Number <b>59-1549190</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>FLAVELL, ROBERT 2701 PONCE DE LEON BLVD SUITE 302 CORAL GABLES, FL 33134</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		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

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, 2007**

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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PD	HERNANDEZ, ROBERTO	1051 SW 1ST STREET MIAMI, FL 33130	<input checked="" type="checkbox"/> Delete			
	TD	FERREIRO, JOSE M.	1051 S.W. 1ST ST. #301 MIAMI, FL 33130	<input checked="" type="checkbox"/> Delete	<b>President</b>	<b>JOSE M. FERREIRO</b>	<b>1051 SW 1ST STREET MIAMI, FL 33130</b>
	SD	MUSTELL, LORENZO	1051 SW 1ST STREET MIAMI, FL 33130	<input type="checkbox"/> Delete	<b>Treasurer</b>	<b>DAVID A. RODRIGUEZ</b>	<b>1031 SW 1ST STREET MIAMI, FL 33130</b>
	VPD	ZAMORA, MODESTO	1051 SW 1ST STREET, APT #311 MIAMI, FL 33130	<input type="checkbox"/> Delete			
	S	CUELLAT, NORA	651- SW 1ST MIAMI, FL 33130	<input type="checkbox"/> Delete			
				<input type="checkbox"/> Delete			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

**L. Mustell** **SD LORENZO** **1/28/07** **(305)**  
**MUSTELL** **442-457**