

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90045 037 ***150.00

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1. Entity Name
NEIGHBORHOOD PROPERTY MANAGEMENT, INC.



Principal Place of Business

7740 W 2ND COURT
STE 4
HIALEAH, FL 33010

Mailing Address

7740 W 2ND COURT
STE 4
HIALEAH, FL 33010

2. Principal Place of Business - No P.O. Box #

3150 W 68th St

3. Mailing Address

P.O. Box 160310

Suite, Apt. #, etc.

Suite 205

Suite, Apt. #, etc.

City & State

Hialeah, Florida

City & State

Hialeah Florida

Zip

33016

Country

USA

Zip

33016

Country

USA

01242007

Chg-P

CR2E034 (12/06)

4. FEI Number

75-3203133

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CABRERA, AGUSTIN
7740 W 2ND COURT
STE 4
HIALEAH, FL 33010

7. Name and Address of New Registered Agent

Name Cabrera, Agustin

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

2150 West 68th St Suite 205

City Hialeah

FL

Zip Code

33016

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 Agustin Cabrera

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01/25/07

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME CABRERA, AGUSTIN
STREET ADDRESS 7740 W 2ND COURT #4
CITY-ST-ZIP HIALEAH, FL 33010 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME Cabrera, Agustin ☒ Change ☐ Addition
STREET ADDRESS 2150 W 68th St Suite 205
CITY-ST-ZIP Hialeah, FL 33016

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

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

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 607, 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: Agustin Cabrera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/07

Date

786 487 3800

Daytime Phone #