## 2007 NOT-FOR-PROFIT CORPORATION

## Mar 02, 2007 8:00 am **ANNUAL REPORT** Secretary of State **DOCUMENT #737206** 03-02-2007 90015 028 \*\*\*\*61.25 INTERNATIONAL GARDENS SECTION 4 HOMEOWNERS ASSOCIATION INC. Principal Place of Business Mailing Address **400₽:**:-2030 SW 123RD CT 2030 SW 123RD CT MIAMI, FL 33175 MIAMI, FL 33175 3. Mailing Address 2. Principal Place of Business - No P.O. Box # 941523 P.O.BOK Suite, Apt. #, etc. Suite, Apt. #, etc 02272007 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 65-0021758 City & State Applied For PL. MEAMI Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 33194 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FERNANDEZ, JORGE A 2030 SW 123RD CT Street Address (P.O. Box Number is Not Acceptable) MIAMI FL, FL 33175 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 JORGE A. FERNANDO (NOTE Registered Agent sign Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TITLE ☐ Delete FERNANDEZ, JORGE A NAME 2030 SW 123RD CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition MOONEY, ADA NAME STREET ADDRESS 2045 SW 125 CT STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP VD TITLE ☐ Delete DILE ☐ Change Addition NAME RAMOS, ISMAEL NAME STREET ADDRESS STREET ADDRESS 2040 SW 123 CT CITY-ST-ZIP MIAMI, FL 33175 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition RODRIGUEZ, JESUS NAME STREET ADDRESS 12425 SW 22 TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 CITY-ST-ZIP SD DILE TITLE ☐ Defete ☐ Change ☐ Addition MARTINEZ, MARIA L NAME NAME STREET ADDRESS 1940 SW 123 CT. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. Thereby 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 suppliemental 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 appears, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: \_\_

GREDSHAR

FILED