

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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Feb 22, 2008 08:00 AM
Secretary of State

DOCUMENT # 758136		
1. Entity Name AIRPORT INDUSTRIAL CENTER CONDOMINIUM WAREHOUSE, INC.		

Principal Place of Business 7987 NW 33RD STREET MIAMI FL 33122-1001	Mailing Address TPS MANAGEMENT P.O. BOX 661554 MIAMI SPRINGS FL 33266-1554
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/07)

City & State	City & State	4. FEI Number 59-2163382	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BORELL, ALEXANDER E 224 DATURA STREET STE 1315 WEST PALM BEACH FL 33401	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	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 _____	DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD LOPEZ, JORGE 7985 NW 33RD ST MIAMI FL 33122 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD ESTEBAN, FREIXAS 7967 NW 33RD ST MIAMI FL 33122 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST GAVIRIA, ILEANA D 3300 NW 79TH AVE MIAMI FL 33122 ☐ 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 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
000000835387 02/29/08-80033-017 61.25	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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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 Section 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: 