

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 10, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 712484**

1. Entity Name  
**BROADWATER BEACH ARMS II, INC.**



Principal Place of Business  
**6494 COLLINS AVE. #26  
ATTN: FREDDY D. FERNANDEZ  
MIAMI BEACH, FL 33141 US**

Mailing Address  
**6494 COLLINS AVE. #26  
ATTN: FREDDY D. FERNANDEZ  
MIAMI BEACH, FL 33141 US**



02292008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-0995967</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**FERNANDEZ, FREDDY D  
6494 COLLINS AVE.  
#26  
MIAMI BEACH, FL 33141**

**DO NOT WRITE  
IN THIS SPACE**

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 obligation of, the 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, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
SARDINA, GENOVEVA  
6494 COLLINS AVE, #27  
MIAMI BEACH, FL 33141**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DP  
FAILDE, HORTENSIA  
6494 COLLINS AVE #24  
MIAMI BEACH, FL 33141**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DV  
PADILLA, MIRIAM  
6494 COLLINS AVE #23  
MIAMI BEACH, FL 33141**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DT  
FERUANDEZ, FREDDY D  
6494 COLLINNS AVE #26  
MIAMI BEACH, FL 33141**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
PADILLA, MIRIAM  
6494 COLLINS AVE #23  
MIAMI BEACH, FL 33141**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
FONSECA, JOSE L  
6494 COLLINS AVE #33  
MIAMI BEACH, FL 33141**

000000853993  
03/26/08-80089-023 61.25

**DO NOT WRITE  
IN THIS SPACE**

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 #