## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 04, 2004 8:00 am Secretary of State DOCUMENT # 717063 ----1.-Entity Name 02-04-2004 90085 004 \*\*\*\*61.25 THREE HORIZONS, NORTH, CONDOMINIUM, INC. Principal Place of Business Mailing Address 1470 NORTHEAST 125TH TERRACE 1470 NORTHEAST 125TH TERRACE NORTH MIAMI FL 33161 NORTH MIAMI FL 33161 24006897 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-1359665 Not Applicable Zip Zip, Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PEARSON, RUTH Street Address (P.O. Box Number is Not Acceptable) 1470 NE 125 TERRACE #611 NO MIAMI FL 33161 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 1.3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRES TITLE Change Addition TITLE Delete BAIR, ALSTON BAIR, ALSTON NAME NAME 1470NE 125 TERR \$506 1470 NE 125 TER #506 STREET ADDRESS STREET ADDRESS N MIAMI FL 33161 N.MIAMI, FL 33161 CITY-ST-ZIP CITY-ST-ZIP THTLE ☐ Delete TITLE DIR ☐ Change Addition EMELIO LO PEZ BREGONZI, MIRTHA NAME 1470 NE 125 TERR 207 1470 NE 125 TERR #603 STREET ADDRESS STREET ADDRESS N MIAMI FL 33161 CITY-ST-ZIP CITY-ST-ZIP N.MIAMI, PL 33161 TITLE Delete ☐ Change ■ Addition PEARSON, RUTH -----NAME NAME 1470 NE 125TH TERR #611 STREET ADDRESS STREET ADDRESS N MIAMI FL 33161 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete CARIANO, ALFRED NAME NAME 1470 NE 125 TERR PH7 STREET ADDRESS STREET ADDRESS MIAMI FL 33161 CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition HEIŞLER, JUDITH NAME NAME 1470 NE 125 TERR #410 STREET ADDRESS STREET ADDRESS MIAMI FL 33161 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change . Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

RUTH PEARSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

Pearson

**FILED**