2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 16, 2005 8:00 am **Secretary of State DOCUMENT # 717063** 1. Entity Name 02-16-2005 90043 002 ****61.25 THREE HORIZONS, NORTH, CONDOMINIUM, INC. Principal Place of Business Mailing Address 1470 NORTHEAST 125TH TERRACE 1470 NORTHEAST 125TH TERRACE 50016249 NORTH MIAMI FL 33161 NORTH MIAMI FL 33161 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-1359665 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEARSON, RUTH Street Address (P.O. Box Number is Not Acceptable) 1470 NE 125 TERRACE #611 NO MIAMI FL 33161 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. Due By May 1, 2005 Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DELIU POBLADOR TETLÉ ☐ Delete TITLE Change **X** Addition BAIR, ALSTON 1470 NE 125 TERR #702 NAME NAME 1470 NE 125 TER #506 STREET ADDRESS STREET ADDRESS N MIAMI FL 33161 CITY-ST-ZIP CITY-ST-ZIP N:MIAMI, FL 33161 TITLE Detete TITLE Addition 💢 CLAUDIO SANTOS BREGONZI, MIRTHA NAME NAME 1470 NE 125 TERR#PHI 1470 NE 125 TERR #603 STREET ADDRESS STREET ADDRESS N MIAMI FL 33161 CITY-ST-ZIP CITY-ST-ZIP TITLE ____ Addition ☐ Delete PEARSON, RUTH NAME NAME 1470 NE 125TH TERR #611 STREET ADDRESS STREET ADDRESS N MIAMI FL 33161 CITY-ST-ZIP CITY-ST-ZIP 🔀 Delete TITLE TITLE Change ☐ Addition LOPEZ, EMELIO NAME NAME 1470 NE 125 TERR 207 STREET ADDRESS STREET ADDRESS MIAMI FL 33161 CITY-ST-ZIP CITY-ST-ZIP .Delete ☐ Change ☐ Addition HEISLER, JUDITH 1470 NE 125 TERR #410 STREET ADDRESS STREET ADDRESS MIAMI FL 33161 CITY+SI-7IP 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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED