

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90158 006 ****70.00

DOCUMENT # 719033 1. Entity Name RO-MONT SOUTH CONDOMINIUM "E", INC.					
Principal Place of Business 20314 NE 2ND AVE NORTH MIAMI BEACH, FL 33179			Mailing Address 20314 NE 2ND AVE NORTH MIAMI BEACH, FL 33179		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address 20314 NE 2ND AVE		
City & State			City & State MIAMI GARDENS, FL		
Zip 33179		Country USA		4. FEI Number 59-1359699	
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RO-MONT SOUTH EXECUTIVE COUNCIL INC 20314 NE 2ND AVENUE NORTH MIAMI BEACH, FL 33179			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 _____ 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, 2004		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DE'PATIE, JEAN 160 NE 203 TERR. #29 NORTH MIAMI BEACH, FL 33179	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MURRASO, VIRGINIA 160 NE 203 TERR. #28 MIAMI GARDENS, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WANER, FRED 160 NE 203 TERRACE # E-4 NORTH MIAMI BEACH, FL 33179	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GIBSON, HILDA 160 NE 203 TERR. #8 MIAMI GARDENS, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AMAMO, OBED 160 NE 203 TERRACE # E-17 NORTH MIAMI BEACH, FL 33179	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VD AMADO, OBED 160 NE 203 TERR. # E-17 MIAMI GARDENS, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RODRIGUEZ, GUILLERMO 160 NE 203 TERR #17 N. MIAMI BEACH, FL 33179	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GARCIA, FRANK 160 NE 203 TERR. # E-23 MIAMI GARDENS, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PUPO, LIZA 160 NE 203 TERR. #22 N. MIAMI BEACH, FL 33179	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	3VD HERVE, ROY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VD HERVE, ROY 160 NE 203 TERRACE # E-7 MIAMI, FL 33179	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	3VD HERVE, ROY
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: <u><i>Frank Garcia</i></u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date <u>4/26/04</u> Daytime Phone # <u>305-652-0520</u>					