

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722820

**FILED**  
**Mar 07, 2012**  
**Secretary of State**

**Entity Name:** MIAMI LAKES CYPRESS VILLAS HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

15017 ROYAL PALM LANE  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

15012 ROYAL PALM AVE  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

6924 CROWN GATE DR  
MIAMI LAKES, FL 33014 US

**New Mailing Address:**

**FEI Number:** 59-2226621      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRAVO, MIRIAM PRES  
6924 CROWN GATE DR  
MIAMI LAKES, FL 33014 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BRAVO, MIRIAM PRES  
Address: 6924 CROWN GATE DR  
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP  
Name: PRIETO, RICARDO VP  
Address: 8450 NW 7TH ST  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T  
Name: RESTREPO, CELMIRA T  
Address: 7050 NW 173 DR #401  
City-St-Zip: MIAMI, FL 33015

Title: S  
Name: BRAVO, MIRIAM  
Address: 6924 CROWN GATE DR  
City-St-Zip: MIAMI LAKES, FL 33024 20

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MIRIAM BRAVO

PRES

03/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date