## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 725837** 

FILED Jan 21, 2005 Secretary of State

Entity Name: GABLES NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

GABLES NORTH COND. 234 ANTIQUERA AVENUE

APT #8 APT #8

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

234 ANTIQUERA AVENUE 900 WEST 49TH STREET

APT #8 SUITE 220

CORAL GABLES, FL 33134 US HIALEAH, FL 33012 US

FEI Number: 23-7305141 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PASCUL, ROSETTE
234 ANTIQUERA, #8
CORAL GABLES, FL 33134 US
DELATORRE, CLEMENTE
900 WEST 49TH STREET
STE. 220

CORAL GABLES, FL 33134 US STE. 220 HIALEAH, FL 33012 US

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: CLEMENTE L DELATORRE

SIGNATURE: CLEMENTE J. DELATORRE 01/21/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: NOVA, MIREYA Name: SHUST, LISSETTE

Address: 234 ANTIQUERA #5 Address: 234 ANTIQUERA AVENUE UNIT 8
City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 US

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: PASCUL, ROSETTE, Name: PASCUL, ROSETTE,

Address: 234 ANTIQUERA APT 8 Address: 234 ANTIQUERA AVENUE UNIT 8
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VD ( ) Delete Title: D (X) Change ( ) Addition Name: FISHER, BARBARA Name: FISHER, BARBARA

Address: 234 ANTIQUERA #3 Address: 234 ANTIQUERA AVENUE UNIT 8

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 GUERRA, JOE
 Name:
 NOVA, MIREYA

 Address:
 234 ANTIQUERA #6
 Address:
 234 ANTIQUERA AVENUE UNIT 8

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:
 CORAL GABLES, FL 33012 US

 $\label{eq:title:P} \mbox{Title:} \qquad \mbox{P} \qquad \mbox{( ) Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{VP} \qquad \mbox{(X) Change ( ) Addition}$ 

Name: ANASTASIA, GARCIA Name: CHENVEY, CHRIS

 Address:
 234 ANTIQUERA #6
 Address:
 234 ANTIQUERA AVENUE UNIT 8

 City-St-Zip:
 CORAL GABLES, FL 33134 US
 City-St-Zip:
 CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LISSETTE SHUST P 01/21/2005