

FILE NOW: FILING FEE IS \$61.25

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Apr 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **734849** (3)

1. Corporation Name

WEST FLAGLER HERITAGE NUMBER TWO CONDOMINIUM, IN C.



Principal Place of Business 131 SW 109 AVE STE L-9 MIAMI FL 33174 US	Mailing Address 131 S.W. 109TH AVENUE #L-9 MIAMI FL 33174 US
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2. Principal Place of Business 21	2a. Mailing Address 26 400 S.W. 107 AVE.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 312
City & State 23	City & State 28 Miami, FL
Zip 24	Country 25
33174	USA

3. Date Incorporated or Qualified 01/27/1976	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1775204	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent SIERRA, MARIA 131 SW 109 AVE STE L-9 MIAMI FL 33174	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1808, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* DATE **4/10/97**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	☐ DELETE
NAME	PO SIERRA, MARIA
STREET ADDRESS	131 S.W. 109TH AVENUE, #L-9
CITY-ST-ZIP	MIAMI, FL 00000
TITLE	☐ DELETE
NAME	SD MUNOZ, MIGUEL E
STREET ADDRESS	131 SW 109 AVE, STE L-4
CITY-ST-ZIP	MIAMI FL
TITLE	☒ DELETE
NAME	RIGNAK, ANTONIO
STREET ADDRESS	10851 S.W. 2ND ST. #K-100
CITY-ST-ZIP	MIAMI FL 33174
TITLE	☐ DELETE
NAME	DT HERNANDEZ, IRENE
STREET ADDRESS	120 S.W. 108TH AVENUE, #1-4
CITY-ST-ZIP	MIAMI FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	DIRECTOR ROBERTO VILCHES
3.3 STREET ADDRESS	130 S.W. 108 Ave. # J-10
3.4 CITY-ST-ZIP	Miami, FL 33174
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	DIRECTOR GEORGINA OTERO
4.3 STREET ADDRESS	130 S.W. 108 Ave. # J-11
4.4 CITY-ST-ZIP	Miami, FL 33174
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **4/10/97** (305) 220-5684
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **Maria Sierra President** Daytime Phone # **0032796**

CR2E037 (9/96)