

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 05, 1999 8:00 am
Secretary of State

04-05-1999 90010 025 ****61.25

DOCUMENT # 734849

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

400 SW 107 AVE
STE #312
MIAMI FL 33174
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

Country

30

3. Date Incorporated or Qualified

01/27/1976

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

9. Name and Address of Current Registered Agent

SIERRA, MARIA
131 SW 109 AVE
STE L-9
MIAMI FL 33174

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 617.1508, 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/31/99

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME SIERRA, MARIA
STREET ADDRESS 131 S.W. 109TH AVENUE, #L-9
CITY-ST-ZIP MIAMI, FL 00000

TITLE SD ☐ DELETE
NAME MUNOZ, MIGUEL E
STREET ADDRESS 131 SW 109 AVE, STE L-4
CITY-ST-ZIP MIAMI FL

TITLE D ☐ DELETE
NAME VILCHES, ROBERTO
STREET ADDRESS 130 SW 108 AVE, #J-10
CITY-ST-ZIP MIAMI FL

TITLE DT ☐ DELETE
NAME HERNANDEZ, IRENE
STREET ADDRESS 120 S.W. 108TH AVENUE, #I-4
CITY-ST-ZIP MIAMI FL

TITLE D ☐ DELETE
NAME OTERO, GEORGINA
STREET ADDRESS 130 SW 108TH AVE, J-11
CITY-ST-ZIP MIAMI FL

TITLE D ☐ DELETE
NAME PENEDO, ARMANDO
STREET ADDRESS 13220 SW 38TH TERRACE
CITY-ST-ZIP MIAMI FL 33176

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

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE: *[Signature]* Maria Sierra 3/31/99 (305) 220-5684
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0034324

CR2E037 (1/1/98)