

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734849

FILED
Mar 30, 2009
Secretary of State

Entity Name: WEST FLAGLER HERITAGE NUMBER TWO CONDOMINIUM, INC.

Current Principal Place of Business:

131 SW 109 AVE
MIAMI, FL 33174 US

New Principal Place of Business:

Current Mailing Address:

400 SW 107 AVE.
#312
MIAMI, FL 33174 US

New Mailing Address:

FEI Number: 59-1775204 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CANGAS, ALBERTO
121SW 109TH AVENUE
#M-6
MIAMI, FL 33174 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: PD () Delete
Name: CANGAS, ALBERTO
Address: 121 SW 109TH AVE, #M-6
City-St-Zip: MIAMI, FL 33174

Title: D () Delete
Name: MOLINA, MARLEN
Address: 130 SW 108 AVE. #J-05
City-St-Zip: MIAMI, FL 33174

Title: D () Delete
Name: DUSSO, MANUEL
Address: 10851 SW 2ND STREET K-303
City-St-Zip: MIAMI, FL 33174

Title: SD () Delete
Name: OTERO, GEORGINA
Address: 130 SW 108TH AVENUE J-11
City-St-Zip: MIAMI, FL 33174

Title: TD () Delete
Name: SALGADO, ANTONIO
Address: 10851 SW 2ND STREET K-305
City-St-Zip: MIAMI, FL 33174

Title: VP (X) Delete
Name: SISO, JUAN
Address: 10851 SW 2ND STREET K-103
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DUASSO, MANUEL
Address: 10851 SW 2ND STREET K-303
City-St-Zip: MIAMI, FL 33174

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ALBERTO CANGAS

P/D

03/30/2009

Electronic Signature of Signing Officer or Director

Date