

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739216 (0)

1. Corporation Name

ROGCAB WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7327 NW 8TH ST.
MIAMI FL 33126
US

7327 NW 8TH ST
MIAMI FL 33126
US



3. Date incorporated or Qualified

06/03/1977

3a. Date of Last Report

05/16/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLANCA M. DUQUE
7325 NW 8TH ST.
MIAMI FL 33126

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 Blanca M Duque

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME FAJIN, RAMON
STREET ADDRESS 7339 N.W. 8TH STREET
CITY-ST-ZIP MIAMI FL 33126

1.1 TITLE PD ☐ Change ☐ Addition
1.2 NAME ZICLER FREITAS
1.3 STREET ADDRESS 7341 NW 8 ST
1.4 CITY-ST-ZIP MIAMI FLA 33126

TITLE VD ☐ DELETE
NAME FAJIN, MANUEL J.
STREET ADDRESS 7339 N.W. 8TH STREET
CITY-ST-ZIP MIAMI FL 33126

2.1 TITLE VD ☐ Change ☐ Addition
2.2 NAME RAMON FAJIN
2.3 STREET ADDRESS 7339 NW 8 ST
2.4 CITY-ST-ZIP MIAMI FLA 33126

TITLE TSD ☐ DELETE
NAME BLANCA M. DUQUE
STREET ADDRESS 7325 NW 8TH ST.
CITY-ST-ZIP MIAMI FL 33126

3.1 TITLE TSD ☐ Change ☐ Addition
3.2 NAME BLANCA M DUQUE
3.3 STREET ADDRESS 7327 NW 8 ST
3.4 CITY-ST-ZIP MIAMI FLA 33126

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Blanca M Duque

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-29-96

Date

Daytime Phone #

CR2E037 (12/95)