

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
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90017 021 ****61.25

DOCUMENT # 739698

1. Corporation Name
COSTA BELLA ASSOCIATION, INC.

Principal Place of Business
1450 S. BAYSHORE DRIVE
MIAMI FL 33131-3612

Mailing Address
1450 BRICKEL BAY DR
OFFICE
MIAMI FL 33131
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

06/29/1984

4. FEI Number

59-1754406

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

10. Name and Address of New Registered Agent

DE LA TORRE, HELIO
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES FL 33134

81 Name

SKRLD, INC.

82 Street Address (P.O. Box Number is Not Acceptable)

201 Alhambra Circle, Suite 1102

83

84 City

Coral Gables

FL

85 Zip Code
33134

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 *Helio De la Torre Pres.*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/20/99

12. OFFICERS AND DIRECTORS

TITLE ☒ SECRETARY ☐ DELETE
NAME CABALLERO, GLORIA
STREET ADDRESS 1450 BRICKEL BAY DR #1107
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ DELETE
NAME T
EARL, BRENDA L
STREET ADDRESS 1450 BRICKEL BAY DR #1212
CITY-ST-ZIP MIAMI FL 33131

TITLE ☒ DELETE
NAME DS
RIOS, DORA Y
STREET ADDRESS 1450 BRICKEL BAY DR #2002
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ DELETE
NAME DP
PEREZ, JOAQUIN
STREET ADDRESS 1450 BRICKEL BAY DR #2003
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ DELETE
NAME VP
VALCARCE, ARMANDO L
STREET ADDRESS 1450 BRICKEL BAY DR #1610
CITY-ST-ZIP MIAMI FL 33131

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
3.3 STREET ADDRESS MANUEL PEREZ
3.4 CITY-ST-ZIP 1450 BRICKEL BAY DR. # 912
MIAMI, FL 33131

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: *Helio De la Torre Pres.* SIGNATURE REQUIRED

14-99 305-373-3100

CR2E037 (11/98)