

# NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED

03 JUN -9 AM 8:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

400020693634  
06/09/03--01097--001 \*\*70.00

DOCUMENT # 745671  
1. Entity Name  
VILLA 56 SOUTH CONDOMINIUM ASSOC., INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1738 W. 55 Place  
Suite, Apt. #, etc.

3. Mailing Address  
1738 W. 55 Place  
Suite, Apt. #, etc.

City & State  
Hialeah, Florida

City & State  
Hialeah, Florida

Zip 33012 Country USA

Zip 33012 Country USA

4. FEI Number  
592000732

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
ELVIRA MATOS

Street Address (P.O. Box Number is Not Acceptable)  
1738 W 55 Place

City Hialeah FL Zip Code 33012

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Elvira Matos* DATE 6-6-03

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FEE IS \$61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ELVIRA MATOS 1738 W. 55 Place Hialeah, FL 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS EDITH RODRIGUEZ 5579 W. 17 Avenue Hialeah, FL 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DANIEL LEZCANO 1734 W. 55 Place Hialeah, FL 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEANDRO PEREDA 5563 W. 17 Avenue Hialeah, FL 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANUEL LEGON 5596 W. 17 Court Hialeah, FL 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOSE FLORES 5554 W, 17 Court Hialeah, FL 33012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elvira Matos President* Date 6/6/03 305 666 6962

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/02)

7/6/10

VILLA 56 SOUTH CONDOMINIUM ASSOC., INC.  
Document #745671

**ATTACHMENT WITH CONTINUATION ADDITIONAL DIRECTOR**

TITLE	D	MIRIAM MOREJON
NAME		
STREET ADDRESS	5568 W. 17 Court	
CITY ST ZIP	Hialeah, FL	33012