

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747559

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** THE HORIZONS CONDOMINIUM NO. 2 ASSOCIATION, INC.

**Current Principal Place of Business:**

8025 SW 107 AVE  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

14275 SW 142 AVE  
MIAMI, FL 33186 US

**New Mailing Address:**

**FEI Number:** 59-1912487

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRIAY CARLOS A  
DORAL CORPORATE CENTER II, SUITE 100  
3750 NW 87TH AVENUE  
DORAL, FL 33178 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: PRES  
Name: ADDA, MICHAEL J  
Address: 8025 SW 107 AVE. # 116  
City-St-Zip: MIAMI, FL 33173

Title: VP  
Name: SARFARAZ, ANOUSHEH  
Address: 8025 SW 107 AVE. # 208  
City-St-Zip: MIAMI, FL 33173

Title: TREA  
Name: MORGAN, JACQUELINE E  
Address: 8025 SW 107 AVE. # 314  
City-St-Zip: MIAMI, FL 33173

Title: DIR  
Name: HALPREN, RUTH B  
Address: 8025 SW 107 AVE. # 207  
City-St-Zip: MIAMI, FL 33173

Title: SECR  
Name: LECUSAY, HORTENSIA  
Address: 8025 SW 107 AVE. # 118  
City-St-Zip: MIAMI, FL 33173

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL J ADDA

PRES

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date