### FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 748243**

#### PATIO VILLAS BLOCK 4 ASSOCIATION, INC.

Principal Place of Busin	9
7332 FOX CHAPEL DR	
HIALEAH FL 33015	-
US	

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

Mailing Address

7332 FOX CHAPEL DR HIALEAH FL 33015

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

# **FILED** Feb 04, 1999 8:00am **Secretary of State**

02-04-1999 90001 002 \*\*\*\*61.25



3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

07/30/1979

59-1970481

4. FEI Number

Zip Country Zip Country Zip Country	23	,	28	,			5. Certificate of Statu	s Desired		Fee Rec	quired
9. Name and Address of Current Registered Agent    10. Name and Address of New Registered Agent			Zip		untry			- 1			
RIVERA, IRIS C 7332 FOX CHAPEL DR HIALEAH FL 33015  82 Street Address (P.O. Box Number is Not Acceptable)  7332 FOX CHAPEL DR HIALEAH FL 33015  84 Oily  FL 85 Zip Code  85 Oily  FL 85 Zip Code  86 Oily  FL 85 Zip Code  87 Oily  FL 85 Zip Code  87 Oily  FL 85 Zip Code  87 Oily  FL 85 Zip Code  88 Oily  FL 85 Zip Code  88 Oily  FL 85 Zip Code  88 Oily  FL 85 Zip Code  89 Oily  FL 85 Zip Code  80		9. Name and Address of Cu	rrent Registered Agent		į		10. Name and Addre	ss of New Reg	istered A	gent	
HIALEAH FL 3015  B3  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  B5 Zip Co		\$ "XXXXX"	( had	111	81	Name					
HIALEAH FL 3015  B3  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  HIALEAH FL 3015  B4 City  FL B5 Zip Code  B5 Zip Co	RIVERA IRIS CS. BLOCK & ASSOCIATION, INC.				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)				
Bit   City   FL   Bit   Bit   City   FL   Bit   City   FL   Bit   City   FL   Bit	/332 FUX	CHAPEL DH			83				•		
The provisions of Sections 817.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida: Such change was authorized by the corporation's board of directors; (hereby accept the appointment as registered 2 agent, Lam familiar with, and accept the obligations of Section 617.0503, Florida Statutes.    Signature	MIALEAM I	FL 33015	. *								•
The filter or registered agent, or both, in the State of Flondes Such change was authorized by the corporation's board of directors; increasy accept the appointment as registered 30 agent. Lam familiar with, and accept the obligations of; Section 177.0509, Floridas Statutes  Signature. 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.  THE PD ONEIL, JOHN  12. NAME  ONEIL, JOHN  13. STREET ADDRESS  THIS TOWNER.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD ONEIL, JOHN  13. STREET ADDRESS  14. CITY-ST-ZPP  INC. Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD ONEIL, JOHN  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD ONEIL, JOHN  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD ONEIL, JOHN  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD ONEIL, JOHN  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD ONEIL, JOHN  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD ONEIL, JOHN  14. CHANGE  15. THE POOR OF THE PROJECT OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	- 	ingi ne	والمساور المساور المساود	·		•	M	e.e.e.e.e.e	, FL		a ta tue teen?
Signature, lyapid or primod name of Implicative agent and this if applicable.    NOTE   Registered Agent agent and interfrequency when interestable?	office or r	registered agent, or both, in the Si	tate of Florida. Such char	nge was authorize	ed by t	не согрога	tion's board of directors. I r	iereby accept t	ne appoin	tment as reg	ustered 🔅 🔝
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PD	SIGNATURE	A		MOTE: Posistan	ad Aanat	alanatura regu	and when reinstation)		DATE	<u></u>	
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indicated on this annual report or supplied with this time 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.

Applied For

\$8.75 Additional

Not Applicable