

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 8:00 am
Secretary of State

01-07-2005 90020 036 ****61.25

DOCUMENT # 748275		
1. Entity Name TAMIAMI VILLAGE CONDOMINIUM ASSOCIATION, INC.		

Principal Place of Business 1131 S.W. 105TH AVE. MIAMI, FL 33174	Mailing Address 2026 S.W. 1ST STREET STE 6 MIAMI, FL 33135
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50000665



2. Principal Place of Business		3. Mailing Address P.O. Box 940596	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Miami, Florida	
Zip	Country	Zip	Country
		33194	USA-

01032005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-1946443		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent
DE LA RIONDA, CARLOS 2020 S.W. 1ST STREET STE 6 MIAMI, FL 33135		Name Miguel Zamora
		Street Address (P.O. Box Number is Not Acceptable) 1141 SW 105 AVE #505
		City Miami, FL Zip Code 33174

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  Miguel Zamora Secretary 1/3/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2005

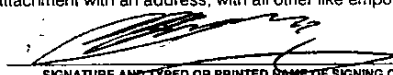
9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ZAMORA, MIGUEL A 1141 SW 105 AVE. #505 MIAMI, FL 33174 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Lujan, Cristobal 1011 SW 105 AVE #200 Miami, FL 33174 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAV ABREU, EPIFANIO 14963 SW 60 STREET MIAMI, FL 33193 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DE LA RIONDA, HORTENSIA PO BOX 341 MIAMI, FL 33135 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP OTANO, PEDRO 1001 SW 105 AVE #116 MIAMI, FL 33174 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAV LUTON, CRISTOBAL 1011 SW 105 AVE. #200 MIAMI, FL 33174 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GONZALEZ, NANCY A 1111 SW 105 AVE., #614 MIAMI, FL 33174 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 Block 11 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE:  **1/3/05** **3055544639**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #