2605 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

May 02, 2005 8:00 am Secretary of State **DOCUMENT #749937** 05-02-2005 90424 008 ****70.00 ORMAR GARDEN CONDOMINIUM, INC. Principal Place of Business Mailing Address 2011 WEST 62 STREET 6001 N.W. 37TH STREET VIRGINIA GARDENS, FL 33166 HIALEAH, FL 33016 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 04202005 Chg-NP CR2E037 (10/03) Applied For City & State City & State 4. FEI Number 59-2234486 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **AMERICAN MANAGEMENT & REALTY** Street Address (P.O. Box Number is Not Acceptable) **2011 WEST 62 STREET** HIALEAH, FL 33016 City Zip Code 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 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 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE RAMOS MARISTA 4001 NW 37 37 #1 DE LEO, LUCIA NAME NAME STREET ADDRESS 641 SWAN AVENUE STREET ADDRESS VIRGINIA GALDONS, FT. 33164 CITY-ST-ZIP MIAMI SPRINGS, FL 33166 CITY-ST-ZIP GARCIA MARIA TITLE ☐ Delete TITLE DE LEO, VINCENT NAME NAME 4001 H. 1216 WN 1002 STREET ADDRESS 641 SWAN AVENUE STREET ADDRESS VIRGINIA GALDERS, F1. 33144 CITY-ST-ZIP MIAMI SPRINGS, FL 33166 CITY-ST-ZIP TITLE ☐ Celete TITLE LOREZ, DWIA NAME PARSON, FREDERICK NAME LOREZ, WMITS 6001 NW 375+#2 VIRGINIA GALDENS Fr. 33166 STREET ADDRESS 6001 NW 37 STREET STREET ADDRESS CITY-ST-ZIP VIRGINIA GARDENS, FL 33166 CITY-ST-7IP TITI F ☐ Delete TITLE Santarfania Lourdes: 6001NW 375T#5 Virbinia 6, FZ 33166 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TTLE ☐ Change Addition DeLeo Vincent NAME NAME 6415 wan Avenue STREET ADDRESS STREET ADDRESS Miami Springs, FL 33166 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

FILED

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 turther 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. MARIGELA RAMOS 4/27/05 (30) 871-2118
NO OFFICER OR DIRECTOR Date Daytime Phone # SIGNATURES