


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90298 003 ****61.25

DOCUMENT # 753327

1. Entity Name
THE VILLAS OF AMBERWOOD CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
MJB MGMT, SVCS., INC.
19501 NE 10TH AVE, STE. 300
NORTH MIAMI BEACH, FL 33179

Mailing Address
MJB MGMT, SVCS., INC.
19501 NE 10TH AVE, STE. 300
NORTH MIAMI BEACH, FL 33179



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01272005 Chg-NP CR2E037 (10/03)

City & State
 City & State

Zip Country
 Zip Country

4. FEI Number
59-2099483

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

MJB MANAGEMENT SERVICES, INC.
17250 NE 19TH AVE.
MIAMI, FL 33162

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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: *Montse Borronat* DATE: 4/12/05

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

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

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD GONZALEZ, LOURDES 10170 NW 41ST ST MIAMI, FL 33178 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD DOMINGUEZ, JANE 10103 NW 41TH ST MIAMI, FL 33178 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP AQUI, LEWIS 10066 NW 41 ST. MIAMI, FL 33178 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD JOHANN, ALI A 10172 NW 41TH ST MIAMI, FL 33178 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DD PARREIRAS, LUIS 10056 NW 41 ST. MIAMI, FL 33178 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD SO Aqui Lewis 10066 NW 41st Miami, FL 33178 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD PD Johan Ali 10172 NW 41th st Miami, FL 33178 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DD DD Pilar Bonilla 10056 NW 41st Miami, FL 33178 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> 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: *Montse Borronat* DATE: 4/12/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR