

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # 753962

1. Entity Name
**AMERICAS' GATEWAY PARK PROPERTY OWNERS
ASSOCIATION, INC.**



Principal Place of Business
**8880 NW 20 ST., SUITE E
MIAMI FL, 33172**

Mailing Address
**10165 NW 19 STREET
MIAMI, FL 33172 US**



01282008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-3574594

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**EASTON, EDWARD W
10165 NW 19TH ST
MIAMI, FL 33172**

**DO NOT WRITE
IN THIS SPACE**

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
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD POMARES, ANGELO 10165 BW 19 STREET MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD ALTMAN, STUART 10165 NW 19 STREET MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EASTON, EDWARD W 10165 NW 19 STREET MIAMI, FL 33172
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05/27/08-80073-009 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward W. Easton

APR 7 2008

Date

Daytime Phone #

305-593-2222