

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008 8:00 am
Secretary of State

02-13-2008 90022 023 ****70.00

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1. Entity Name
HIALEAH-DADE DEVELOPMENT, INC.



Principal Place of Business
501 PALM AVENUE
HIALEAH, FL 33010

Mailing Address
501 PALM AVENUE
HIALEAH, FL 33010

2. Principal Place of Business - No P.O. Box #
501 PALM AVE

3. Mailing Address
501 PALM AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01172008 Chg-NP CR2E037 (12/06)

City & State
HIALEAH FL 33010

City & State
HIALEAH FL

4. FEI Number
59-2199599

Applied For
Not Applicable

Zip
33010

Country
MIAMI DADE

Zip
33010

Country
MIAMI - Dade

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

6. Name and Address of Current Registered Agent

MILIAN, SAUL M
501 PALM AVENUE
HIALEAH, FL 33010

7. Name and Address of New Registered Agent

Name MARTHA Toledo
Street Address (P.O. Box Number is Not Acceptable)
501 PALM AVE

City HIALEAH FL Zip Code 33010

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 MARTHA Toledo - chairperson 2/1/08
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

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MILIAN, SAUL M 501 PALM AVE HIALEAH, FL 33010	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD USATEGUI, RAMON 501 PALM AVE. HIALEAH, FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GAVALDA, TERESA 501 PALM AVENUE HIALEAH, FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOLEDO, MARTHA 501 PALM AVENUE HIALEAH, FL 33010	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RODRIGUEZ, SOE 501 PALM AVENUE HIALEAH, FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairperson MARTHA Toledo 501 PALM AVE HIALEAH, FL 33010	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice Chairman JOSE A. Perez 501 PALM AVE HIALEAH, FL 33010	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary ANGEL RENTAS 501 PALM AVE HIALEAH, FL 33010	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice Secretary Bernard Adrovex 501 PALM AVE HIALEAH, FL 33010	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ELISA ROBLES 501 PALM AVE HIALEAH, FL 33010	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director TERESA GAVALDA 501 PALM AVE HIALEAH, FL 33010	☒ Change ☐ Addition

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: MARTHA Toledo - chairperson 2/1/08 205-884 1049
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #