

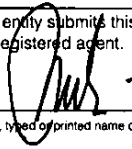



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90062 008 ****61.25

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|--|---|--|---|---|--|
| DOCUMENT # 769653 1. Entity Name SEVILLA TERRACE CONDOMINIUM ASSOCIATION, INC. | | | |  | |
| Principal Place of Business 1072 WEST 79 ST HIALEAH, FL 33014 US | | | | Mailing Address P.O BOX 160310 HIALEAH, FL 33016 US | |
| 2. Principal Place of Business - No P.O. Box # 1072 W 79 ST | | 3. Mailing Address P.O BOX 160310 | |  | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 01042008 Chg-NP CR2E037 (12/06) | |
| City & State Hialeah FL | | City & State Hialeah, FL | | 4. FEI Number 59-2400694 | |
| Zip 33014 | | Country USA | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent GONZALEZ, JOSE E 1078 WEST 79 ST HIALEAH, FL 33014 | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div> | | |
| 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:  (NOTE: Registered Agent signature required when reinstating) DATE: | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2008 | | 9. Election Campaign Financing <input type="checkbox"/> \$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 | DP GONZALEZ, JOSE E 1078 WEST 79 ST HIALEAH, FL 33014 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP Gonzalez, Jose E. 1078 W 79 St Hialeah, FL 33014 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT QUIJANO, GUILLERMO 1076 WEST 79 ST HIALEAH, FL 33014 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT Quijano Guillermo 1076 W 79 St Hialeah FL 33014 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS VAZQUEZ, LUIS E 1072 WEST 79 ST HIALEAH, FL 33014 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS Vazquez, Luis E. 1072 W 79 St Hialeah FL 33014 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FERNANDEZ, NANCY 1068 WEST 79 ST HIALEAH, FL 33014 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | 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 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:  Jose E Gonzalez 305/819/2361 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |