

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 08:00 A
Secretary of State

DOCUMENT # 769969

1. Entity Name
**SWEETWATER VILLAS WEST CONDOMINIUM
ASSOCIATION NO. FOUR, INC.**



Principal Place of Business

**133 SW 113 AVE.
#102
MIAMI, FL 33174 US**

Mailing Address

**133 SW 113 AVE.
#102
MIAMI, FL 33174 US**



01042008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1004881

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MANRIQUE, RAFAEL
133 S.W. 113TH AVE #102
MIAMI, FL 33174**

**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 PD
NAME ENSENAT, JUAN
STREET ADDRESS 131 SW 113 AVENUE
CITY - ST - ZIP MIAMI, FL 33174

TITLE TD
NAME ZAPATA, REYNALDA
STREET ADDRESS 133 SW 113 AVE.
CITY - ST - ZIP MIAMI, FL 33174

TITLE SD
NAME ALVAREZ, ELDA
STREET ADDRESS 121 S.W. 113TH AVE
CITY - ST - ZIP MIAMI, FL 33174

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000774425
01/07/08-80014-008 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:

Reynalda Zapata
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-05-08

Date

(305) 2286458

Daytime Phone #