


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 17, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 770319**  
 1. Entity Name  
 WAREHOUSE 2293 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business      Mailing Address  
 2301 W 76TH STREET      2301 W 76TH STREET  
 %ILEANA BRAVO      HIALEAH, FL 33016 US  
 HIALEAH, FL 33016 US

**DO NOT WRITE IN THIS SPACE**



03152005 No Chg-NP CR2E037 (10/03)

4. FEI Number      Applied For  
 59-2344669      Not Applicable

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

6. Name and Address of Current Registered Agent  
 BRAVO, ILEANA  
 2301 W 76TH STREET  
 HIALEAH, FL 33016

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MORALES, EDUARDO
STREET ADDRESS	2301 W 76TH STREET
CITY - ST - ZIP	HIALEAH, FL 33016
TITLE	VD
NAME	COOGLE, GREGORY
STREET ADDRESS	2293 W 76TH STREET
CITY - ST - ZIP	HIALEAH, FL 33016
TITLE	SD
NAME	GOMEZ, RENATO
STREET ADDRESS	2297 W 76TH STREET
CITY - ST - ZIP	HIALEAH, FL 33016
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 03/17/05-80058-007 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** Eduardo Morales      03/15/05      (305) 823-0303  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #