


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # 811716 1. Entity Name MAR VISTA APARTMENTS INC	
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Principal Place of Business 3013 HARBOR DRIVE FT LAUDERDALE, FL 33316	Mailing Address 1322 SW 17 ST FORT LAUDERDALE, FL 33316 US
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04242007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-6065770	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HERBERT, KATHLEEN
3013 HARBOR DR
FORT LAUDERDALE, FL 33316**

**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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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 MYLES, WEGMAN 3013 HARBOR DRIVE FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HERBERT, KATHLEEN 3013 HARBOR DRIVE FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HOPKINS, VERONICA 3013 HARBOR DRIVE FORT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ANDREW, DOMMICK 3013 HARBOR DRIVE FORT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/14/07-80035-004 150.00

**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 607, 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: Kathleen Herbert **KATHLEEN HERBERT** 4/25/07 954-525-6116
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #