


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90298 005 ****61.25

DOCUMENT # N00000004994

1. Entity Name
 VILLA ENCANTADA CONDOMINIUM NO. 1 ASSOCIATION, INC.



Principal Place of Business C/O CARRIBEAN PROPERTY MGMT 12301 SW 132 CT MIAMI, FL 33186	Mailing Address C/O CARRIBEAN PROPERTY MGMT 12301 SW 132 CT MIAMI, FL 33186
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50043296

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03162005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-1042964	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUBIN, JONATHAN
 536 BILTMORE WAY
 MIAMI, FL 33134

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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 _____

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 NAME STREET ADDRESS CITY-ST-ZIP	P GAMBOA, MERCEDES 15731 SW 137 AVE #102 MIAMI, FL 33177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CASTELLANO, EMIL 15731 SW 137 AVE., #105 MIAMI, FL 33177
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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)(i), 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:  DATE: 4/18/05 Daytime Phone # _____