

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 27, 2007 8:00 am**  
**Secretary of State**

02-27-2007 90002 042 \*\*\*\*61.25

**DOCUMENT # N00000007463**

1. Entity Name  
**CAZADORES SOUTH HOMEOWNER'S ASSOCIATION, INC.**



Principal Place of Business  
**C/O LAND CAP PROPERTY SVCS  
13800 SW 144 AVE RD  
MIAMI, FL 33186**

Mailing Address  
**C/O LAND CAP PROPERTY SVCS  
13800 SW 144 AVE RD  
MIAMI, FL 33186**

**40025209**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**03-0432759**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SUITS, STEPHEN  
C/O LAND CAP PROPERTY SERVICES  
MIAMI, FL 33186**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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 PD ☒ Delete  
NAME ZULETA, JAVIER  
STREET ADDRESS 13757 SW 170 TERR  
CITY-ST-ZIP MIAMI, FL 33177

TITLE ☐ Change ☒ Addition  
NAME **Daniel Amable**  
STREET ADDRESS **13813 SW 170 Terr**  
CITY-ST-ZIP **Miami FL 33177**  
PRESIDENT

TITLE TD ☒ Delete  
NAME ZULETA, JAVIER  
STREET ADDRESS 13757 SW 170 TERR  
CITY-ST-ZIP MIAMI, FL 33177

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Delete  
NAME DYE, JOSHUA W  
STREET ADDRESS 17084 SW 138 CT  
CITY-ST-ZIP MIAMI, FL 33177

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPD ☒ Delete  
NAME ROBERTSON, RODNEY TATE  
STREET ADDRESS 13733 SW 170 TERR  
CITY-ST-ZIP MIAMI, FL 33177

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME VILLAMIL, GABBY  
STREET ADDRESS 17040 SW 137 PL  
CITY-ST-ZIP MIAMI, FL 33177

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DD ☒ Delete  
NAME GASTILLO, JAIRO  
STREET ADDRESS 13753 SW 179 TERR  
CITY-ST-ZIP MIAMI, FL 33177

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Daniel Amable**

**2/14/07**

Date

Daytime Phone #

**(305) 863-3360**