

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005521

FILED
Jun 15, 2005
Secretary of State

Entity Name: AFFORDABLE HOMES AND RENTALS, INC.

Current Principal Place of Business:

P.O. BOX 172973
HIALEAH, FL 33017

New Principal Place of Business:

POST OFFICE BOX 172973
HIALEAH, FL 33017

Current Mailing Address:

POST OFFICE BOX 172973
HIALEAH, FL 33017

New Mailing Address:

FEI Number: 75-3032504 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DUBOIS, LIBI
16921 N.W. 57 AVENUE
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: MONTENEGRO-TOIRAC, MARLENE
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

Title: D () Delete
Name: TOIRAC, YANELIS
Address: 16921 NORTHWEST 57TH AVENUE
City-St-Zip: MIAMI, FL 33055

Title: D (X) Delete
Name: RIVERA, IRMA
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

Title: D (X) Delete
Name: DUBOIS, LIBI
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: MONTENEGRO-TOIRAC, MARLENE
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

Title: D (X) Change () Addition
Name: DUBOIS, LIBI
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARLENE MONTENEGRO-TOIRAC

P

06/15/2005

Electronic Signature of Signing Officer or Director

Date