

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N02000006942

1. Entity Name

COLORAMA NO. 2 INDUSTRIAL PARK CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business

2415 WEST 80TH STREET STE 4
HIALEAH FL 33016

Mailing Address

2415 WEST 80TH STREET STE 4
HIALEAH FL 33016



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-1173956

Applied For

Not Applicable

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

FERNANDEZ, OLGA N
2415 WEST 80TH STREET
SUITE 4
HIALEAH FL 33016

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 reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

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	S	☐ Delete
NAME	GIL, OSCAR	
STREET ADDRESS	2415 W 80 STREET #2	
CITY- ST- ZIP	HIALEAH FL 33016	
TITLE	P	☐ Delete
NAME	GIL, NANCY J	
STREET ADDRESS	2415 W 80TH ST. #2	
CITY- ST- ZIP	HIALEAH FL 33016	
TITLE	V	☐ Delete
NAME	FERNANDEZ, OLGA N	
STREET ADDRESS	2415 W 80TH ST. #4	
CITY- ST- ZIP	HIALEAH FL 33016	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
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STREET ADDRESS		
CITY- ST- ZIP		
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CITY- ST- ZIP		

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

U00000823188
02/20/08-80028-006 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 fee empowered

SIGNATURE: *[Signature]* President 2/7/08 (305) 827-8115