2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2005 8:00 am
Secretary of State
01-31-2005 90049 019 ****70.00

DOCUMENT # N02000008644

1. Entity Name

THREE ROUND TOWERS RESIDENT COUNCIL, INC.

Principal Place of Business	Mailing Address
2940 N.W. 18 AVE., APT. 1A MIAMI FL 33142	2940 N.W. 18 AVE., APT. 1A MIAMI FL 33142

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E037 (10/04)

4. FEI Number 30-0148478 RIGHT ☒ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RODRIGUEZ, MIRIAM
2940 N.W. 18 AVE., APT. 1A
MIAMI FL 33142

7. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RODRIGUEZ, MIRIAM 2940 N.W. 18 AVE., APT. 1A MIAMI FL 33142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CABRERA, SILVIA 2940 NW 18 AVE #2 MIAMI FL 33142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CAPOTE, JOSE 2940 N.W. 18 AVE., APT. 1A MIAMI FL 33142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ARA, ORLANDO 2940 N.W. 18 AVE., APT. 1A MIAMI FL 33142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V GUCRRA, LEANDRO 2940 NW 18 AVE. #1-A MIAMI FL 33142	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VOCAL NIMIA-VALDEZ 2940 N.W. 18 AVE. #4 MIAMI-FL. 33142 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: MIRIAM RODRIGUEZ 1-25-2005 (305) 638-6306
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #