2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 08:00 AM
Secretary of State

DOCUMENT # N02892

1. Entity Name
HALCON VILLAS CONDOMINIUM NO. 6 ASSOCIATION, INC

Principal Place of Business	Mailing Address
1345 W 41 ST 05 HIALEAH, FL 33012	1345 W 41 ST 05 HIALEAH, FL 33012

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03202008 No Chg-NP CR2E037 (11/05)

4. FEI Number
65-1059055

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ALUART, FERNANDO
1345 W 41 ST
APT #2
HIALEAH, FL 33012

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

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

100000479235
04/08/06-80033-002 70.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PEREZ, ISAAC
STREET ADDRESS	1345 W 41 ST APT 5
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	T
NAME	CHIRINO, PEDRO
STREET ADDRESS	1345 W 41 ST APT 1
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	T
NAME	ALUART, FERNANDO
STREET ADDRESS	1345 W 41 ST APT 2
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 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: _____ Fernando Alvart Director 3/30/06 3058215457
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #