

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90511 001 ***422.50

DOCUMENT # N04000004569

1. Entity Name
BIG HAVANA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
10556 NW 26TH STREET
D-101
DORAL, FL 33172

Mailing Address
10556 NW 26TH STREET
D-101
DORAL, FL 33172

00012000



2. Principal Place of Business

10544 NW 26 ST.

3. Mailing Address

10544 NW 26 ST.

Suite, Apt. #, etc.

E 202

Suite, Apt. #, etc.

E 202

City & State

Doral, FL

City & State

Doral, FL

Zip

33172

Country

U.S.A.

Zip

33172

Country

U.S.A.

05012006

Chg-NP

CR2E037 (4/06)

4. FEI Number

84-1650000

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCATTOLINI, MAURO
10556 NW 26TH STREET
D-101
DORAL, FL 33172

7. Name and Address of New Registered Agent

Name Joseph F. Cabanas

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

Cabanas & Associates, P.A.

10520 NW 26 ST. - C 201

City

Doral

FL

Zip Code

33172

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

04/29/06

Filing Fee is \$61.25
Due by May 1, 2006

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

TITLE V
NAME ECHEVERRIA, RICARDO
STREET ADDRESS 7102 NW 112 COURT
CITY-ST-ZIP DORAL, FL 33178 ☐ Delete

TITLE P
NAME SCATTOLINI, MAURO
STREET ADDRESS 10556 NW 26 STREET #D-101
CITY-ST-ZIP DORAL, FL 33172 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition

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

TITLE P
NAME SCATTOLINI, MAURO
STREET ADDRESS 10544 NW 26 ST. - STC. E 202
CITY-ST-ZIP Doral, FL 33172 ☒ Change ☐ Addition

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

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

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

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 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

Ricardo Echeverria

04/29/06 (305) 5941098
Date Daytime Phone #