# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 22, 2005 8:00 am**
**Secretary of State**
04-08-2005 90054 045 ****61.25

DOCUMENT # N04000006871

1. Entity Name
1675 PLAZA CONDOMINIUM ASSOCIATION, INC.

66012409

| Principal Place of Business | Mailing Address |
|---|---|
| 10579 NW 51ST LANE<br>MIAMI, FL 33178 | 10579 NW 51ST LANE<br>MIAMI, FL 33178 |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 1681 NW 97TH AVE | 1681 NW 97TH AVE |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: DORAL, FLORIDA | City & State: DORAL, FLORIDA |
| Zip: 33172 Country: USA | Zip: 33172 Country: USA |

04052005 Chg-NP CR2E037 (10/03)

4. FEI Number: 30-0309742 ☑ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DE LEO, RICCARDO
18543 SW 104TH AVE.
MIAMI, FL 33157

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
1681 NW 97TH AVENUE

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: D. DeLeo RICARDO DE LEO 4/5/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing 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<br>DE LEO, SANTE<br>10579 NW 51ST LANE<br>MIAMI, FL 33178 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 1681 NW 97TH AVE.<br>DORAL, FL 33172 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>DE LEO, ROBERTO<br>10579 NW 51ST LANE<br>MIAMI, FL 33178 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 1681 NW 97TH AVE.<br>DORAL, FL. 33172 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>DE LEO, RICCARDO<br>10579 NW 51ST LANE<br>MIAMI, FL 33178 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 1681 NW 97TH AVE.<br>DORAL FL. 33172 | ☑ Change ☐ Addition |
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| 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: x D. DeLeo 4.5.05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #