FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N04639

(3)

LAS BRISAS TOWNHOUSE APARTMENTS CONDOMINIUM-NO.

3 ASSOCIATION, INC. Principal Place of Business Mailing Address C/O ACTION GENERAL SERVICES POST OFFICE BOX 110548 1300 W. 46TH ST. HIALEAH FL 33012 HIALEAH FL 33011-0548 3. Date Incorporated or Qualified 08/09/1984 2a. Mailing Address 2. Principal Place of Business 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing

FILED Mar 18 1997 8:00am Secretary of State



Number

59-2665942

3a. Date of Last Report 03/18/1996

Applied For

\$8.75 Additional

Fee Required

Not Applicable

City & State City & State 6. Election Campaign Financing \$5,00 Trust Fund Contribution Added	
	to Fees
Zip Country 7ip Country 8. This corporation has liability for intangible tax under s	199.032,
24 25 29 30 Florida Statutes ☐ Yes 🗶 No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
PARASE A NORM	
RAFAEL A. NODAL 82 Street Address (P.O. Box Number is Not Acceptable)	
ACTION GENERAL SERVICES, CORP 1330 W. 46th St. #17	
1490 W. 49TH PL, SUITE 515	
HIALEAH FL 33012 B4 City B5 7(0.4)	Code
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	012
11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing it	s registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as agent. I and accept the obligations of, Section 617.0503, Florida Statutes.	registerea
SIGNATURE	ļ
Sensity or typed or printed natural of registered agent and tale if applicable (NOTE Registered Agent signature required when reinstalling) DATE	س ــــــــــــــــــــــــــــــــــــ
12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF LICERS AND DIRECTOR	
TITLE PD DELETE 1.1 TITLE Change	Addition
NAME SANCHEZ, ABRAHAM 1.2 NAMI	
STREET ADDRESS 1330 W 46 ST. #17 13 STREET ADDRESS	
CITY+ST-ZIP HIALEAH FL 1.4 CITY+ST-ZIP	
TITLE TD LLETE 2.1 TITLE L Change	Addition
NAME GUATY, ANDRES 2.2 NAME	
STREET ADDRESS 1330 W 46TH STREET #15 23 STREET ADDRESS 23 STREET ADDRESS	
DITY-ST-ZIP HIALEAH FL 2.4 C(TY-ST-ZIP	
TITLE SD Change	Addition
NAME HERNANDEZ, JUAN 3.2 NAME	j
STREET ADDRESS 1320 W 46TH STREET #23 33 STREET ADDRESS	
CITY-ST-ZIP HIALEAH FL 3.4. CITY-ST-ZIP	
TITLE L DELETE 4.1 TITLE L Change	Addition
NAME 4.2 NAME	ŀ
STREET ADDRESS 4.3 STREET ADDRESS	,
CITY-ST-ZIP 4.4 CITY-S1-7IP	
TITLE [_] DELETE [_5.1 TITLE [_] Change	Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-7IP	
TITLE DELETE 611TLE Change	Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-\$1-ZIP 6.4 CITY-\$1-ZIP	
14. I do 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 information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made unit	the
Information indicated on this annual report or suppremental annual report is true and accorded and that my signature shall have the same legal energias in made the same legal energias in modern to the same legal energias in the same legal energi	iamo