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**Mar 04, 1999 8:00 am**  
**Secretary of State**

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0035607

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N04944**

1. Corporation Name

**LA PLAYA DE VARADERO MOTEL CONDOMINIUM ASSOCIATI  
ON, INC.**

Principal Place of Business

15995 COLLINS AVE. ASSOC. BOX  
MIAMI BEACH FL 33160  
US

Mailing Address

PO BOX 650964  
MIAMI FL 33265-0964  
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/31/1984

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2447020

Applied For  
Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

24 Zip 25 Country

28 Zip 29 Country

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOPEZ, ARAMIS  
8902 NW 189TH TERRACE  
MIAMI FL 33015

81 Name **MARIA CASTRO**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**15995 COLLINS AVE # B-320**  
83  
84 City **SUNNY ISLES** FL 85 Zip Code **33160**

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 its 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 registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Maria Castro* **MARIA CASTRO - PRESIDENT** **2/8/99**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE  
NAME **P GONZALEZ, ORLANDA**  
STREET ADDRESS **7815 NW 10TH AVENUE**  
CITY-ST-ZIP **HIALEAH FL 33012**

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME **D JUANA MUNOZ**  
1.3 STREET ADDRESS **15995 COLLINS AVE # A-111**  
1.4 CITY-ST-ZIP **SUNNY ISLES- FL 33160**

TITLE ☒ DELETE  
NAME **LOPEZ, ARAMIS**  
STREET ADDRESS **8902 NW 189TH TERRACE**  
CITY-ST-ZIP **MIAMI FL 33015**

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME **TD ERNESTO AROCHA**  
2.3 STREET ADDRESS **1314 W 38 PL**  
2.4 CITY-ST-ZIP **HIALEAH- FL 33012**

TITLE ☐ DELETE  
NAME **SD GUTIERREZ, RAMON**  
STREET ADDRESS **10405 NW 32ND AVENUE**  
CITY-ST-ZIP **MIAMI FL 33147**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME **D HERNANDEZ, EMILIO**  
STREET ADDRESS **8050 NW 186TH TERRACE**  
CITY-ST-ZIP **MIAMI FL 33015**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME **D RINA LAVERNIA**  
4.3 STREET ADDRESS **3430 W 13 AVE**  
4.4 CITY-ST-ZIP **HIALEAH- FL 33012**

TITLE ☐ DELETE  
NAME **D CASTRO, MARIA**  
STREET ADDRESS **15995 COLLINS AVENUE #A-114**  
CITY-ST-ZIP **SUNNY ISLES FL 33160**

5.1 TITLE ☒ Change ☐ Addition  
5.2 NAME **PRESIDENT**  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Maria Castro* **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/8/99** **(315) 948-9002**  
Date Daytime Phone #

CR2E037 (11/98)