

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2006 8:00 am
Secretary of State

04-17-2006 90402 014 *****61.25

DOCUMENT # N05000002830 1. Entity Name THE ROADS CIVIC ASSOCIATION, CORP.					
Principal Place of Business 2800 SW 5TH AVE MIAMI, FL 33129			Mailing Address 2800 SW 5TH AVE MIAMI, FL 33129		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03242006 Chg-NP CR2E037 (11/05) 4. FEI Number 20-2528939	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MARTINEZ, JOSE M 2100 SALZEDO STREET SUITE 300 CORAL GABLES, FL 33134				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP		<input type="checkbox"/> Delete		
NAME	SUAREZ, ENRIQUE H		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	2800 SW 5TH AVE		STREET ADDRESS		
CITY- ST- ZIP	MIAMI, FL 33129		CITY- ST- ZIP		
TITLE	VD		<input type="checkbox"/> Delete		
NAME	UTSET, MANUEL		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	471 SW 25TH RD		STREET ADDRESS		
CITY- ST- ZIP	MIAMI, FL		CITY- ST- ZIP		
TITLE	SD		<input type="checkbox"/> Delete		
NAME	CABRERA, ALEX		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	2800 SW 5TH AVE		STREET ADDRESS		
CITY- ST- ZIP	MIAMI, FL 33129		CITY- ST- ZIP		
TITLE	TD		<input type="checkbox"/> Delete		
NAME	UTSET, EDUARDO		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	2738 SW 7TH AVE		STREET ADDRESS		
CITY- ST- ZIP	MIAMI, FL		CITY- ST- ZIP		
TITLE	D		<input type="checkbox"/> Delete		
NAME	MARTINEZ, JOSE M		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	466 SW 22ND RD		STREET ADDRESS		
CITY- ST- ZIP	MIAMI, FL		CITY- ST- ZIP		
TITLE			<input type="checkbox"/> Delete		
NAME			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
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 reports 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:			04/04/06 305-856-8181 <small>Date Daytime Phone</small>		