

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90069 030 ****61.25

DOCUMENT # N05000007669

1. Entity Name
**MARINA MILE BUSINESS PARK COMMERCIAL
CONDOMINIUM ASSOCIATION II, INC.**



Principal Place of Business
**2860 MARINA MILE BLVD., STE. 117
FT. LAUDERDALE, FL 33312**

Mailing Address
**400 SANTA CLARA TRAIL
WELLINGTON, FL 33414**

20008045



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03262007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
20-3528743

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MANSFIELD, RAYMOND D
400 SANTA CLARA TRAIL
WELLINGTON, FL 33414**

Name

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

City

FL

Zip Code

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

**Filing Fee is \$61.25
Due by May 1, 2007**

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 PD ☒ Delete
NAME CABRERA, ANTONIO J JR.
STREET ADDRESS 782 NW 42ND AVENUE SUITE 555
CITY-ST-ZIP MIAMI, FL 33126

TITLE VD ☒ Delete
NAME RUBIN, JEFF E
STREET ADDRESS 1320 SOUTH DIXIE HWY, SUITE 881
CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE STD ☒ Delete
NAME BIGGER, WILLIAM A
STREET ADDRESS 3001 SR 84, FIRST FLORICA COMMERCIAL
CITY-ST-ZIP FT. LAUDERDALE, FL 33312

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME **RAYMOND MANSFIELD**
STREET ADDRESS **400 SANTA CLARA TRAIL**
CITY-ST-ZIP **WELLINGTON, FL 33414**

TITLE ☐ Change ☒ Addition
NAME **VP ODD BJORN STEINSLAND**
STREET ADDRESS **400 SANTA CLARA TRAIL**
CITY-ST-ZIP **WELLINGTON, FL 33414**

TITLE ☐ Change ☒ Addition
NAME **SIT Rey de Armas**
STREET ADDRESS **400 SANTA CLARA TRAIL**
CITY-ST-ZIP **WELLINGTON, FL 33414**

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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

Date

Daytime Phone #

[Signature] **Raymond D. Mansfield** 3/29/07 954-791-9666