

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N05000011817

1. Entity Name

SAR CONDOMINIUM ASSOCIATION, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 19 PM 2:39

Principal Place of Business

13601 SW 77 AVENUE
MIAMI FL 33158

Mailing Address

13601 SW 77 AVENUE
MIAMI FL 33158

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/06)

4. FEI Number

Applied For

Not Applicable

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

SARMIENTO, ARMANDO
13601 SW 77 AVENUE
MIAMI FL 33158

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

FILE NOW: FEE IS \$61.25
Due By September 6, 2006

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
PVST
SARMIENTO, ARMANDO
13601 SW 77 AVENUE
MIAMI FL 33158 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition
800080188248
09/26/06--01067--010 *\$61.25

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SARMIENTO, ARMANDO
13601 SW 77 AVENUE
MIAMI FL 33158 ☐ Delete

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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SARMIENTO, ERNESTO
13601 SW 77 AVENUE
MIAMI FL 33158 ☐ Delete

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
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D
PINO, JOSE A
13601 SW 77 AVENUE
MIAMI FL 33158 ☐ Delete

TITLE
NAME
STREET ADDRESS
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☐ Change ☐ Addition

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☐ Delete

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CITY - ST - ZIP
☐ Change ☐ Addition

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

7-15-06

786-234-1733