

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90033 021 ****61.25

DOCUMENT # N05000012703					
1. Entity Name MIRANDA'S CORNER WAREHOUSE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2100 W. 76 ST., STE. 208 HIALEAH, FL 33106			Mailing Address 2100 W. 76 ST., STE. 208 HIALEAH, FL 33106		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02082006 Chg-NP CR2E037 (11/05)	
4. FEI Number Applied For				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired				<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BESU, ROGER ESQ. 4000 PONCE DE LEON BLVD., STE. 470 CORAL GABLES, FL 33146			Name Street Address (P.O. Box Number is Not Acceptable) 2100 W. 76 ST #208 City Hialeah FL Zip Code 33014		
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			DATE 2-10-06		
(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, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	DPT FERRER, JOSE 2100 W. 76 ST., STE. 208 HIALEAH, FL 33106			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSV MARRERO, HECTOR 2100 W. 76 ST., STE. 208 HIALEAH, FL 33106			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TORRENS, LUIS 2100 W. 76 ST., STE. 208 HIALEAH, FL 33106			<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<input type="checkbox"/> Delete	
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:				DATE 2-10-06 305-827-4220	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	