

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N06000002262

1. Entity Name  
MOFFETT PLACE CONDOMINIUM ASSOCIATION, INC.



FILED

07 DEC 19 AM 11:25

STATE OF FLORIDA  
HALLANDALE, FLORIDA



112-0077 REINSTATEMENT FEE \$99 (1/07)

REINSTATEMENT

Principal Place of Business  
1300 MOFFETT STREET  
HALLANDALE, FL 33009

Mailing Address  
1300 MOFFETT STREET  
HALLANDALE, FL 33009

2. Principal Place of Business, No P.O. Box #  
124 NE 3rd St.

3. Mailing Address  
124 NE 3rd St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
POMPANO BEACH, FL

City & State  
POMPANO BEACH, FL

4. FEI Number  
14-1954391

Applied For  
Not Applicable

Zip  
33060

Country  
USA

Zip  
33060

Country  
USA

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

MANCILLA, JOSEPH JR.  
3111 STIRLING ROAD  
FORT LAUDERDALE, FL 33312

Name  
VIVIAN LISSABET

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

1300 MOFFETT ST. # 314

City  
HALLANDALE

FL

Zip Code  
33009

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

12/14/07

FILE NOW!!! FEE IS \$61.25  
After January 1, 2008, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME KATES, STEVE  
STREET ADDRESS 4900 SHERIDAN STREET SUITE 310  
CITY-ST-ZIP DANIA BEACH, FL 33004

TITLE VD  
NAME KATES, HILARY  
STREET ADDRESS 4900 SHERIDAN STREET SUITE 310  
CITY-ST-ZIP DANIA BEACH, FL 33004

TITLE STD  
NAME HUO, ZHI F  
STREET ADDRESS 4900 SHERIDAN STREET SUITE 310  
CITY-ST-ZIP DANIA BEACH, FL 33004

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Treasurer VICE PRES.  
NAME David Fernandez  
STREET ADDRESS P.O. Box 1246  
CITY-ST-ZIP Hallandale, FL 33008

TITLE Secretary - TREASURER  
NAME RENZO PATRICIA  
STREET ADDRESS 1300 MOFFETT ST. #314  
CITY-ST-ZIP Hallandale, FL 33009

TITLE  
NAME VIVIAN LISSABET  
STREET ADDRESS 1300 MOFFETT ST. # 314  
CITY-ST-ZIP HALLANDALE, FL 33009

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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 #

12/14/07

954 786 7414