

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002379

FILED  
May 09, 2007  
Secretary of State

Entity Name: ALLAPATTAH COMMUNITY HOUSING II, INC.

**Current Principal Place of Business:**

2257 NW N. RIVER DR  
MIAMI, FL 33125

**New Principal Place of Business:**

**Current Mailing Address:**

2257 NW N. RIVER DR  
MIAMI, FL 33125

**New Mailing Address:**

FEI Number: 20-4617189      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

WEISS, JAY B ESQUIRE  
2251 SW 22ND ST  
MIAMI, FL 33145      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MESA, ARDO  
Address: 35005 SW 187 CT  
City-St-Zip: MIAMI, FL 33034

Title: D      ( ) Delete  
Name: EGUES, RANDY  
Address: 11770 SW 24TH TERRACE  
City-St-Zip: MIAMI, FL 33175

Title: D      ( ) Delete  
Name: DAUSA, JOSE E  
Address: 9145 FOUNTAINBLEAU #8  
City-St-Zip: MIAMI, FL 33174

Title: D      ( ) Delete  
Name: FAJARDO, ALVARO  
Address: 6039 COLLINS ACE, #633  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D      ( ) Delete  
Name: DUTTON, DOUGLAS  
Address: 7863 W. 36TH AVE  
City-St-Zip: MIAMI, FL 33018

Title: D      ( ) Delete  
Name: TELLA, EDUARDO A  
Address: 11337 NW 15 CT  
City-St-Zip: PEMBROKE PINES, FL 33026

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARDO MESA

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

P/D

05/09/2007

\_\_\_\_\_ Date