

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002379

FILED
Mar 17, 2009
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:

1390 NW 24 AVE
MIAMI, FL 33125

Current Mailing Address:

2257 NW N. RIVER DR
MIAMI, FL 33125

New Mailing Address:

1380 NW 24 AVE
MIAMI, FL 33125

FEI Number: 20-4617189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: PD (X) Change () Addition
Name: MESA, ARDO
Address: 35005 SW 187 CT
City-St-Zip: MIAMI, FL 33034

Title: D (X) Change () Addition
Name: BALBUENA, FRANCISCO M
Address: 9581 FOUNTAINBLEAU #203
City-St-Zip: MIAMI, FL 33172

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

PD

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date