

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000005490

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** VILLAS SAN MIGUEL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

399 NW 72 AVE  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

1430 NW 15 AVE  
MIAMI, FL 33125

**New Mailing Address:**

**FEI Number:** 20-5855523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEO SPITALE JR. P.A.  
501 NE 1ST AVE STE 200  
MIAMI, FL 33132 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:** P  
**Name:** MESTRES, RUSIRIDA  
**Address:** 1430 NW 15 AVE  
**City-St-Zip:** MIAMI, FL 33125

**Title:** D  
**Name:** GALVEZ, ROBERTO  
**Address:** 1430 NW 15 AVE  
**City-St-Zip:** MIAMI, FL 33125

**Title:** S/VP  
**Name:** VERGARA, RACHET  
**Address:** 1430 NW 15 AVE  
**City-St-Zip:** MIAMI, FL 33125

**Title:** D  
**Name:** PEREZ, HECTOR  
**Address:** 1430 NW 15 AVE  
**City-St-Zip:** MIAMI, FL 33125

I hereby 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 all other like empowered.

**SIGNATURE:** RUSIRIDA MESTRES

P

01/16/2012

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

\_\_\_\_\_  
Date