


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90038 007 ****61.25

DOCUMENT # N06036 1. Entity Name PANACHE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business C/O THE CONTINENTAL GROUP 11981 SW 144 CT, #201 MIAMI, FL 33186			Mailing Address C/O THE CONTINENTAL GROUP 11981 SW 144 CT, #201 MIAMI, FL 33186		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2580186	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SIEGFRIED, RIVERA, LERNER, DE LA TORRE & S 8211 WEST BROWARD BLVD SUITE 250 PLANTATION, FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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	S	<input type="checkbox"/> Delete	TITLE	Vice - President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KANAKIS, PETER		NAME		
STREET ADDRESS	14608 SW 95 LANE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33186		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CUETO, PEDRO		NAME		
STREET ADDRESS	14589 SW 95 LANE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33186		CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MENDEZ, ENRIQUE		NAME	Sylvia Schneider	
STREET ADDRESS	9534 SW 143 PLACE		STREET ADDRESS	14351 SW 92 Terr	
CITY-ST-ZIP	MIAMI, FL 33186		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASSIDY, CINDY		NAME		
STREET ADDRESS	14530 SW 93RD TERRACE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33186		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SANCHEZ, ROLANDO		NAME		
STREET ADDRESS	9438 SW 146 PL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33186		CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SUAREZ, LEO		NAME	Francie Diaz	
STREET ADDRESS	14440 SW 95 LANE		STREET ADDRESS	9556 SW 145 Ct	
CITY-ST-ZIP	MIAMI, FL 33186		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: <i>Cynthia da Silva Cassidy</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1/26/08 3053870800 <small>Date Daytime Phone #</small>		