FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 11:30

DOCUMENT # N06484 (2)

1. Corporation Name
HALCON VILLAS CONDOMINIUM NO. 8 ASSOCIATION, INC

Principal Place of Business
1395 W 41 ST
UNIT #1
HIALEAH FL 33012-5982

Mailing Address
C/O TROPICANA REALTY INC
3742 WEST 12 AVE
HIALEAH FL 33012-5982
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/03/1984
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2641573 — Applied For / Not Applicable
5. Certificate of Status Desired: ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☐ No

2. Principal Place of Business — 21
Suite, Apt. #, etc — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc — 27
City & State — 28
Zip — 29 Country — 30

9. Name and Address of Current Registered Agent
PEREZ, PEDRO
3742 WEST 12 AVE
HIALEAH FL 33012-7191

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: (Typed or printed name of registered agent and title if applicable) (NEW Registered Agent signature required after completing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	PEREZ, PEDRO	12 NAME	
STREET ADDRESS	1395 W 41 ST #B-7	13 STREET ADDRESS	
CITY ST ZIP	HIALEAH FL	14 CITY ST ZIP	
TITLE	TD	21 TITLE	☐ Change ☐ Addition
NAME	FIDALGO, ENAR	22 NAME	
STREET ADDRESS	1375 W 41 ST #A-6	23 STREET ADDRESS	
CITY ST ZIP	HIALEAH FL	24 CITY ST ZIP	
TITLE	~~CD~~	31 TITLE	SD ☐ Change ☐ Addition
NAME	~~OLIVEROS, ROGELIO~~	32 NAME	SUSANA DURAN
STREET ADDRESS	~~1395 WEST 41ST ST., SUITE 6B~~	33 STREET ADDRESS	1375 WEST 41 STREET #3A
CITY ST ZIP	~~HIALEAH FL~~	34 CITY ST ZIP	HIALEAH, FL. 33012
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pedro Perez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/15/95 (305) 558-9820
Date Daytime Phone #

0006287