

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 02, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N18822**

1. Entity Name  
**ALAMEDA IV - WEST CONDOMINIUM ASSOCIATION,  
INC.**



Principal Place of Business  
**12069 SW 10 STREET  
MIAMI, FL 33184 US**

Mailing Address  
**12069 SW 10 STREET  
MIAMI, FL 33184 US**

**DO NOT WRITE IN THIS SPACE**



03112008 No Chg-NP CR2E037 (4/06)

4. FEI Number  
**59-2824239**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**RAMIREZ, LUIS G  
12069 S W 10 ST  
MIAMI, FL 33184**

**DO NOT WRITE  
IN THIS SPACE**

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 Luis G Ramirez [Signature] 4/1/2008  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	RAMIREZ, LUIS
STREET ADDRESS	12069 SW 10 ST
CITY-ST-ZIP	MIAMI, FL 33184
TITLE	TD
NAME	RAMIREZ, LUIS G
STREET ADDRESS	12069 S W 10 STREET
CITY-ST-ZIP	MIAMI, FL 33184
TITLE	SD
NAME	SANTOS, NANCY
STREET ADDRESS	12063 S W 10 STREET
CITY-ST-ZIP	MIAMI, FL 33184
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000873036  
04/14/08-80038-018 61.25

**DO NOT WRITE  
IN THIS SPACE**

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: [Signature] Luis G. Ramirez 4/1/2008  
Signature and typed or printed name of signing officer or director Date Daytime Phone #