


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90014 040 ****61.25

DOCUMENT # N20742

1. Entity Name
SAGA LAKE INC.



Principal Place of Business 300 S.W. 12TH AVE., SUITE #A 3RD FLOOR MIAMI, FL 33130 US	Mailing Address 300 S.W. 12TH AVE., SUITE #A 3RD FLOOR MIAMI, FL 33130 US
---	---

54032561



01212004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2806942	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DIAZ, GUARIONE M.
 1223 SW 4TH STREET
 MIAMI, FL 33135**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is **\$61.25** Due by **May 1, 2004**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DIAZ, GUARIONE M. 1223 SW 4TH STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SANTANA, CRISTINA 1223 SW 4TH STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SWITZER, RAQUEL C 1390 SO DIXIE HWY#1108 MIAMI, FL 33146
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PAZOS, ANDRES 1223 SW 4TH STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAVARRO, MARTA 1223 SW 4TH STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALAN, JUAN 1223 SW 4 STREET MIAMI, FL 33135

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **1/26/04** Daytime Phone #: **305 642 3634**

Attachments 02070

54032561

PENINSULA II to XV & SAGA LAKE, INC.
PENINSULA HSG DEVELOPERS & AMERICAN ATLANTIC
BOARD OF DIRECTORS

<u>NAME</u>	<u>ADDRESS</u>	<u>SOCIAL SECURITY #</u>
DIAZ, Guarioné M. Director and President	1223 SW 4 th Street Miami, FL 33135 Tel: (305) 642-3484 Fax: (305) 642-9122	265-72-6368
PAZOS, Andres Director and Executive Vice-President	1223 SW 4 th Street Miami, FL 33135 Tel: (305) 642-3484 Fax: (305) 642-9815	267-95-2954
SANTANA, Cristina Director and Secretary	1223 SW 4 th Street Miami, FL 33135 Tel: (305) 642-3484 Fax: (305) 642-9122	264-91-9097
SWITZER, Raquel C. Director and Treasurer	Switzer & Switzer 1390 South Dixie Highway Suite 660 Miami, FL 33146 Tel: (305) 663-3566 Fax: (305) 665-3060	261-72-6352
BARRETO, Marielena Director	1223 SW 4 th Street Miami, FL 33135 Tel: (305) 642-3634 Fax: (305) 642-5094	591-01-8604
NAVARRO, Marta Director	1223 SW 4 th Street Miami, FL 33135 Tel: (305) 642-3634 Fax: (305) 642-5094	266-17-0587
GALAN, Juan Director	355 Cocoplum Road Coral Gables, FL 33143 Tel: (305) 662-5780 Fax: (305) 667-4773	266-70-9971