

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N22681 (3)
1. Corporation Name
REFLECTIONS AT IMPERIAL LAKE HOMEOWNERS ASSOCIATION INC.



Principal Place of Business
**12434 N.W. 7TH LANE
MIAMI FL 33182**

Mailing Address
**400 S.W. 107TH AVE.
STE. 312
MIAMI FL 33174**

3. Date Incorporated or Qualified **09/25/1987** 3a. Date of Last Report **10/09/1995**

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number 65-0296675	Applied For
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Zip	29	Zip	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
25	Country	30	Country			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ALVAREZ, JUANA R 12446 N.W. 7TH LANE MIAMI FL 33182				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Juana R. Alvarez* DATE **4/17/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANCHEZ, HUMBERTO	1.2 NAME	
STREET ADDRESS	12434 N.W. 7TH LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33182	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOAISIGA, HENRY	2.2 NAME	
STREET ADDRESS	12368 N.W. 7TH LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33182	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALVAREZ, JUANANDRO R	3.2 NAME	S/D Alvarez Juana R.
STREET ADDRESS	12446 N.W. 7TH LANE	3.3 STREET ADDRESS	12446 N.W. 7th Lane
CITY-ST-ZIP	MIAMI FL 33182	3.4 CITY-ST-ZIP	Miami, FL 33182
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAUDERO, ROBERTO	4.2 NAME	T/D Landero Roberto
STREET ADDRESS	12450 N.W. 7TH LANE	4.3 STREET ADDRESS	12450 N.W. 7th Lane
CITY-ST-ZIP	MIAMI FL 33182	4.4 CITY-ST-ZIP	Miami, FL 33182
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALVAREZ, JORGE	5.2 NAME	D Armando Perez
STREET ADDRESS	12447 N.W. 7TH LANE	5.3 STREET ADDRESS	12442 N.W. 7th Lane
CITY-ST-ZIP	MIAMI FL 33182	5.4 CITY-ST-ZIP	Miami, FL 33182
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRER, MARIA	6.2 NAME	
STREET ADDRESS	12527 N.W. 7TH LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33182	6.4 CITY-ST-ZIP	

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)(k), Florida Statutes. I further certify that the information indicated on this 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Humberto Sanchez* DATE **4/17/96** DAYTIME PHONE **(305) 220-5684**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
President

CR2E037 (12/95)