

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90021 001 ****61.25

DOCUMENT # N22681

Entity Name

REFLECTIONS AT IMPERIAL LAKE HOMEOWNERS ASSOCIAT

Principal Place of Business	Mailing Address
12368 NW 7 LANE MIAMI FL 33182	400 S.W. 107TH AVE. STE. 312 MIAMI FL 33174-8400

A0029400



DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number	Applied For
65-0296675	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	

6. Name and Address of Current Registered Agent

ALVAREZ, J. ROSA
 12446 NW 7TH LANE
 MAIMI FL 33182

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City

FL Zip Code

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.

SIGNATURE: *Armando Rosa Alvarez (Pres.)* DATE: 3/9/2000

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TD LOAISIGA, HENRY 12368 NW 7TH LN MIAMI FL 33182	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D J. ROSA ALVAREZ 12446 N.W. 7th Lane Miami, FL 33182
D VELAZQUEZ, MIRTA 12447 NW 7TH LN MIAMI FL 33182	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D HUMBERTO SANCHEZ 12434 N.W. 7th Lane Miami, FL 33182
SD ALVAREZ, JUANA 12446 NW 7TH LANE MIAMI FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D ARMANDO PEREZ 12442 N.W. 7th Lane Miami, FL 33182
D ESCARPIO, ORLANDO 12360 NW 7TH LN MIAMI FL 33182	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D HENRY LOAISIGA 12368 N.W. 7th Lane Miami, FL 33182
D LOAISIGA, HENRY 12368 NW 7 LANE MIAMI FL 33182	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR TITO SALAZAR 12344 N.W. 7th Lane Miami, FL 33182
PD PEREZ, ARMANDO 12442 NW 7TH LANE MIAMI FL 33182	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 empowerments.

SIGNATURE: *Armando Rosa Alvarez (Pres.)* DATE: 3/9/2000 (305) 220-5684

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President

CR2E037 (9/99)