2001 UNIFORM BUSINESS REPORT (UBR) Apr 16, 2001 8:00 am Secretary of State DOCUMENT # N22681 1. Entity Name REFLECTIONS AT IMPERIAL LAKE HOMEOWNERS ASSOCIAT 04-16-2001 90012 031 ****61.25 Principal Place of Business Mailing Address 12446 NW 7 LANE 400 S.W. 107TH AVE. **MIAMI FL 33182** STF. 312 MIAMI FL 33174 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0296675 Not Applicable Country Zip Country Zip .**\$8.7.5**. Additional. __ 5. Certificate of Status Desired 🔑 🗔 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ALVAREZ, J. ROSA 12446 NW 7TH LANE **MAIMI FL 33182** Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. XX Change Addition ☐ Delete TITLE TITLE ***X**X E**¥¥** s/d Loaisiga, Henry NAME NAME STREET ADDRESS 12368 NW 7TH LN STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33182** D ☐ Change XIX Addition TITLE V/P/DTITLE XXX Delete HUMBERTO SANCHEZ 12438 N.W. 7 Lane **VELAZQUEZ, MIRTA** NAME NAME STREET ADDRESS 12447 NW 7TH LN STREET ADDRESS CITY-ST-ZIP Miami, FL 33182 CITY-ST-ZIP MIAMI FL 33182 **SOXX** P/D TITLE XX Change Addition ☐ Delete TITLE ALVAREZ, JUANA NAME NAME STREET ADDRESS STREET ADDRESS 12446 NW 7TH LANE CITY-ST-7IP CITY-ST-ZIP MIAMI FL Change XXXddition XX Delete TITLE TITLE Director ESCARPIO, ORLANDO NAME NAME Tito Salazar 12360 NW 7TH LN STREET ADDRESS STREET ADDRESS 344 N.W. CITY-ST-7IP CITY-ST-ZIP **MIAMI FL 33182** ☐ Addition TITLE XX Delete TITLE Change LOAISIGA, HENRY NAME NAME STREET ADDRESS 12368 NW 7 LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33182** ROK T/D ☐ Delete TITLE XX Change ■ Addition

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SQUATURE AND THE DIRECTOR OF SIGNING OFFICE OF DIRECTOR

PEREZ, ARMANDO

MIAMI FL 33182

12442 NW 7TH LANE

NAME

STREET ADDRESS

CITY-ST-ZIP

Date Daytime Phone #