


**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90179 042 \*\*\*\*61.25

**DOCUMENT # N22681**

1. Entity Name  
**REFLECTIONS AT IMPERIAL LAKE HOMEOWNERS ASSOCIATION INC.**



Principal Place of Business  
**12446 NW 7 LANE  
MIAMI FL 33182**

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

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip



CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0296675**

Applied For  
Not Applicable

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

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

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

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 *J. Alvarez* **4-11-03**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS \$61.25**

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

**Make Check Payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	VPD	<input type="checkbox"/> Delete
NAME	LOAISIGA, HENRY	
STREET ADDRESS	12368 NW 7TH LN	
CITY-ST-ZIP	MIAMI FL 33182	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SANCHEZ, HUMBERTO	
STREET ADDRESS	12438 NW 7 LANE	
CITY-ST-ZIP	MIAMI FL 33182	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ALVAREZ, JUANA	
STREET ADDRESS	12446 NW 7TH LANE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SALAZAR, TITO	
STREET ADDRESS	12344 NW 7 LANE	
CITY-ST-ZIP	MIAMI FL 33182	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PEREZ, ARMANDO	
STREET ADDRESS	12442 NW 7TH LANE	
CITY-ST-ZIP	MIAMI FL 33182	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Humberto Sanchez* **HUMBERTO SANCHEZ (PRESIDENT) 4-11-03 (305) 220-5684**

CR2E037 (10/02)