


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # N29377	
1. Entity Name PHOENIX MANOR, INC.	

Principal Place of Business 3941 SW 89 AVE MIAMI, FL 33165 US	Mailing Address 11031 NE 6 AVE MIAMI, FL 33161 US
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DO NOT WRITE IN THIS SPACE

01312007 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	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

RUIZ-GARCIA, ILEANA
 11031 NE 6TH AVE
 MIAMI, FL 33161

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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 \$81.25
Due by May 1, 2007

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	P FERNANDEZ, JORGE A 150 ALHAMBRA CIR STE 1240 MIAMI, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SOKOLOW, CAROL 10241 SW 142ND STREET MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOSS, MICHAEL A 3090 SW 140TH AVE HOLLYWOOD, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DUMAINE, MARIAN 199TH TERR MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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100000647345
 03/06/07-80067-021 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  ILEANA RUIZ-GARCIA 2-22-07 305-398-6122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #