


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90390 042 ****61.25

DOCUMENT # N30335

1. Entity Name
 THE VILLAS OF AMBERWOOD III CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
MJB Management Services, Inc. 250 NE 19TH AVE
 19501 NE 10th Avenue, Suite 300 RTH MIAMI BEACH, FL 33162 US
 North Miami Beach, FL 33179 Same

2. Principal Place of Business 3. Mailing Address
 19501 NE 10th Avenue 19501 NE 10th Avenue
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 Suite 300 Suite 300
 City & State City & State
 North Miami Beach FL North Miami Beach FL
 Zip Country Zip Country
 33179 USA 33179 USA



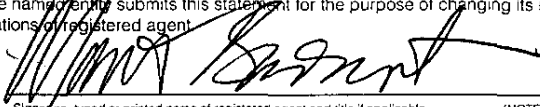
03222004 Chg-NP CR2E037 (10/03)

6. Name and Address of Current Registered Agent
MJB Management Services, Inc.
 19501 NE 10th Avenue, Suite 300
 North Miami Beach, FL 33179

7. Name and Address of New Registered Agent
 Name **MJB Management Services, Inc**
 Street Address (P.O. Box Number is Not Acceptable)
 19501 NE 10th Avenue
 Suite 300
 City **North Miami Beach FL** Zip Code **33179**

4. FEI Number 65-0101591 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

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  DATE **04-14-04**

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004

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

Make check payable to Florida Department of State

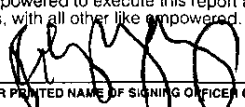
10. OFFICERS AND DIRECTORS

TITLE	DD	<input type="checkbox"/> Delete
NAME	GARCIA, MARIA	
STREET ADDRESS	10002 NW 41 ST	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE	DD	<input type="checkbox"/> Delete
NAME	TREPTOW, BRUNO	
STREET ADDRESS	9916 NW 41 ST	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE	DP	<input type="checkbox"/> Delete
NAME	FILIZ, YAUUZ	
STREET ADDRESS	9916 NW 41 ST	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE	D	<input type="checkbox"/> Delete
NAME	ENRIQUE, MARQUEZ	
STREET ADDRESS	19924 N.W. 41 STREET	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE	DD	<input checked="" type="checkbox"/> Delete
NAME	PEREZ, ROBERT	
STREET ADDRESS	9908 NW 41 ST	
CITY-ST-ZIP	MIAMI, FL 33178	
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	FD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FILIZ, YAUUZ	
STREET ADDRESS	9916 NW 41 ST	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Enrique, Marquez	
STREET ADDRESS	19924, NW 41 ST	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Miller, Bruce	
STREET ADDRESS	4646 NW 102 PL	
CITY-ST-ZIP	MIAMI FL 33178	

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:  DATE **4/2/04** DAYTIME PHONE # **305 477 7229**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #