2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 8:00 am
Secretary of State
02-06-2008 90026 040 ****70.00

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DOCUMENT # N34795

1. Entity Name
BLOSSOMS AT THE HAMMOCKS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
10034 HAMMOCKS BLVD MIAMI, FL 33196 US	P.O.BOX 440067 MIAMI, FL 33144 US

01292008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0203789 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
UNLIMITED PROPERTY MGMT 7655 NW 50 ST MIAMI, FL 33166	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 UNLIMITED PROPERTY MANAGEMENT 1/31/08.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D FERNANDO, ACOSTA 7001 SW 87 CT MIAMI, FL 33173	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD JUSTO, PEREZ 7001 SW 87 CT MIAMI, FL 33173	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CESPEDES, FRANCISCO 7001 SW 87 CT MIAMI, FL 33173	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CARBONERO JOHN 7655 NW 50ST MIAMI, FL 33166	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CARBENERO, JOHN 7001 SW 87 CT MIAMI, FL 33173	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD QUIÑONEZ ALVARO 7655 NW 50ST MIAMI, FL 33166	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DD PEREZ, DANIEL 7001 SW 87 CT MIAMI, FL 33173	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] 1/31/08 786-231-4074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #