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May 30 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N46556 (9)

1. Corporation Name

PLAZA VILLAS TOWNHOUSES ASSOCIATION, INC.

Principal Place of Business

Mailing Address

720 S.W. 2ND ST
SUITE 12
MIAMI FL 33130720 S.W. 2ND ST
SUITE 12
MIAMI FL 33130-2333

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Date Incorporated or Qualified
12/20/19913a. Date of Last Report
03/21/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROJAS, GERARDO
728 SW 2ND ST #7
MIAMI FL 33130

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ROJAS, GERARDO
STREET ADDRESS 728 SW 2ND ST #7
CITY - ST - ZIP MIAMI FL 331301.1 TITLE PD
1.2 NAME ROJAS, GERARDO
1.3 STREET ADDRESS 728 SW 2ND ST #7
1.4 CITY - ST - ZIP MIAMI FL 33130TITLE TD
NAME ORTEGA, BERTA
STREET ADDRESS 728 SW 2ND ST. #8
CITY - ST - ZIP MIAMI FL 331302.1 TITLE TD
2.2 NAME MEDINA RAUL
2.3 STREET ADDRESS 720 S.W. 2nd St #2
2.4 CITY - ST - ZIP MIAMI FL 33130TITLE SD
NAME MEDINA, RAUL
STREET ADDRESS 720 SW 2ND ST #2
CITY - ST - ZIP MIAMI FL 331303.1 TITLE SD
3.2 NAME RAQUEL TEJADA
3.3 STREET ADDRESS 728 SW 2nd St #8
3.4 CITY - ST - ZIP MIAMI FL 33130TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 000-0000

CR2E037 (9/96)