

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46556

FILED
Feb 11, 2008
Secretary of State

Entity Name: PLAZA VILLAS TOWNHOUSES ASSOCIATION, INC.

Current Principal Place of Business:

720 S.W. 2ND ST
SUITE 12
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

720 S.W. 2ND ST
SUITE 12
MIAMI, FL 33130

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ORTEGA, RAMON
728 S.W. 2ND STREET, APT #6
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ORTEGA, RAMON
Address: 728 S.W. 2ND STREET, APT. #6
City-St-Zip: MIAMI, FL 33130

Title: VD () Delete
Name: ARREAGA, BYRON
Address: 728 S.W. 2ND STREET, APT. #9
City-St-Zip: MIAMI, FL 33130

Title: TD () Delete
Name: MARTINEZ, NOEL
Address: 720 S.W. 2ND STREET, APT. #2
City-St-Zip: MIAMI, FL 33130

Title: SD () Delete
Name: CUADRA, CESAR
Address: 720 S.W. 2ND STREET, APT. #5
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NOEL MARTINEZ

TR

02/11/2008

Electronic Signature of Signing Officer or Director

_____ Date