


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2007 8:00 am
Secretary of State

05-24-2007 90002 028 ****61.25

DOCUMENT # N93000004848 1. Entity Name PLAZAWEST WAREHOUSE CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 8555 NW 29TH ST. MIAMI, FL 33172 US		Mailing Address C/O THE FOSTER COMPANY 12394 SW 82 AVE MIAMI, FL 33156 US	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip		3. Mailing Address <i>Unlimited Property</i> <i>P.O. Box 440067</i> <i>MIAMI, FL</i> <i>33144</i>	
Country		Country <i>Dade</i>	
6. Name and Address of Current Registered Agent SCOTT, F JOSEPH 12394 SW 82ND AVE MIAMI, FL 33156		7. Name and Address of New Registered Agent <i>Unlimited Property Management</i> <i>1055 NW 50 St.</i> <i>Miami</i> City FL Zip Code 33166	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	TITLE	NAME
	PD PALOMO, GUILLERMO		PD ROBERT MELO
STREET ADDRESS	8182 NW 31ST ST	STREET ADDRESS	3037 NW 82nd AVE
CITY-ST-ZIP	MIAMI, FL 33122	CITY-ST-ZIP	MIAMI, FL 33122
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	VD DANIA, SERGIO		VP/D HECTOR SALVADOR
STREET ADDRESS	3077 NW 82ND AVE	STREET ADDRESS	3041 NW 82 AVE
CITY-ST-ZIP	MIAMI, FL 33122	CITY-ST-ZIP	MIAMI, FL 33122
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	TD OLMOS, GUSTAVO N		T/D NESTOR GONZALEZ
STREET ADDRESS	8190 NW 31ST ST	STREET ADDRESS	3073 NW 82nd AVE
CITY-ST-ZIP	MIAMI, FL 33122	CITY-ST-ZIP	MIAMI, FL 33122
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
		Date _____ Daytime Phone # _____	