


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90463 034 ****61.25

DOCUMENT # N94000000596	
1. Entity Name PENINSULA HOUSING DEVELOPMENT INC. VII	

Principal Place of Business 300 S.W. 12TH AVE. 3RD FLOOR MIAMI, FL 33130 US	Mailing Address 300 S.W. 12TH AVE. 3RD FLOOR MIAMI, FL 33130 US
--	--

DO NOT WRITE IN THIS SPACE



04142005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0491787	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent DIAZ, GUARIONE M 1223 SW 4TH ST. 3RD FLOOR MIAMI, FL 33135
--

DO NOT WRITE IN THIS SPACE

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>	DATE _____
--	------------

Filing Fee is \$61.25. Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DIAZ, GUARIONE M 1223 SW 4TH ST. MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARRETO, MARIELENA 1223 SW 4TH ST MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NAVARRO, MARTA 1223 SW 4TH STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP PAZOS, ANDRES 1223 S.W. 4 STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS SANTANA, CRISTINA 1223 SW 4TH STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT SWITZER, RAQUEL C 1309 S DIXIE HWY SUITE 660 MIAMI, FL 33146

DO NOT WRITE IN THIS SPACE

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: 	4/14/05	(305) 642-3634
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>

40071817

Page Two

ATTACHMENT

N9400000596

D

Galan, Juan Add x
1223 SW 4 Street
Miami, Florida 33135