

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 08:00 A
Secretary of State

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



02022007 No Chg-NP

CR2E037 (4/06)

4. FEI Number

65-0491787

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

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

000000757347
05/23/07-80067-009 61.25

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #