

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90016 017 ****61.25

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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

40000734



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01082008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0491787

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIAZ, GUARIONE M
1223 SW 4TH ST.
3RD FLOOR
MIAMI, FL 33135

Name

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

City

FL

Zip Code

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 reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 PD ☐ Delete
NAME DIAZ, GUARIONE M
STREET ADDRESS 1223 SW 4TH ST.
CITY-ST-ZIP MIAMI, FL 33135

TITLE DIRECTOR ☐ Change ☒ Addition
NAME ALLEN, WILFREDO
STREET ADDRESS 2250 SW 3 AVE #303
CITY-ST-ZIP MIAMI, FL 33129

TITLE D ☐ Delete
NAME BARRETO, MARIELENA
STREET ADDRESS 1223 SW 4TH ST
CITY-ST-ZIP MIAMI, FL 33135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME NAVARRO, MARTA
STREET ADDRESS 1223 SW 4TH STREET
CITY-ST-ZIP MIAMI, FL 33135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVP ☐ Delete
NAME PAZOS, ANDRES
STREET ADDRESS 1223 S.W. 4 STREET
CITY-ST-ZIP MIAMI, FL 33135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS ☐ Delete
NAME SANTANA, CRISTINA
STREET ADDRESS 1223 SW 4TH STREET
CITY-ST-ZIP MIAMI, FL 33135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DT ☐ Delete
NAME SWITZER, RAQUEL C
STREET ADDRESS 1309 S DIXIE HWY SUITE 660
CITY-ST-ZIP MIAMI, FL 33146

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 #