

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90026 025 ****70.00

DOCUMENT # N94000003919

1. Entity Name

RIO GARDENS ASSOCIATION, INC.



Principal Place of Business

421 S.W. 3 ST.
APT 15
MIAMI FL 33130
US

Mailing Address

421 S.W. 3 ST.
APT 15
MIAMI FL 33130
US

2. Principal Place of Business

421 SW 3 ST
15

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI - FL

City & State

Zip

33130

Country

Dade

Zip

Country

4. FEI Number

65-0610682

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHAMBLESS, GLADYS
421 SW 3 ST #15
MIAMI FL 33130

7. Name and Address of New Registered Agent

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

Gladys Chambliss Gladys Chambliss

02/16/06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE PT ☐ Delete
NAME CHAMBLESS, GLADYS
STREET ADDRESS 421 S.W. 3 ST. APT #15
CITY-ST-ZIP MIAMI FL 33130

TITLE V ☒ Delete
NAME ABREU, ANISIA
STREET ADDRESS 427 S.W. 3 STREET, APT #17
CITY-ST-ZIP MIAMI FL 33130

TITLE D ☐ Delete
NAME PEREZ, GENARA
STREET ADDRESS 436 S.W. 2 STREET, APT. 4
CITY-ST-ZIP MIAMI FL 33130

TITLE D ☐ Delete
NAME VILLAGARAS, GILBERTO
STREET ADDRESS 459 S.W. 3 STREET, APT 20
CITY-ST-ZIP MIAMI FL 33130

TITLE D ☒ Delete
NAME VARGAS, ISMAEL
STREET ADDRESS 444 S.W. 2 STREET APT. #13
CITY-ST-ZIP MIAMI FL 33130

TITLE D ☐ Delete
NAME Asia Grant
STREET ADDRESS 427 SW 3 ST, apt #17
CITY-ST-ZIP MIAMI-FL-33130

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ Change ☐ Addition
NAME Eddy Lario
STREET ADDRESS 436 SW 3 ST, apt #2
CITY-ST-ZIP MIAMI-FL-33130

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

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

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

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 Section 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: Gladys Chambliss Gladys Chambliss

02/16/06 (205) 5457728