2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 8:00 am Secretary of State 04-23-2007 90054 034 ****61.25

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Entity Name
PUERTO BELLO CONDOMINIUM NO. 1 ASSOCIATION,



INC.								
Principal Place 12438 NW 1 MIAMI, FL 33	1TH LN. #2004	Mailing Address 11936 SW 8TH STREET MIAMI, FL 33184		7001	400.00-			
Suite, Apt.	lacae Business No PB. Box # 1040	3. Mailing Address At Loy Suite, Apt. #, etc.	Manage	00040007	g-NP CR2E037	(12/06)		
Cip & State	- / /	City & State	772 LN	4. FEI Number 65-068363		Applied For		
141271 3318	2 Country Country	33112	Country A	5. Certificate of Sta	atus Desired 🗀 \$8	Not Applicable 75 Additional Required	le	
	6. Name and Address of Current F	<u> </u>		7. Name and Addi	ess.of.New.Registered Age		ᅥ	
	Z, JESUS R 8 STREET		Name Street Act	Tose Luis tress (P.D. Boy Number is A	Loses joi roceptavie			
ţ	• •		City /	ami,	FL	33°182.		
	named entity submits this statement for ions of registered agent.	the purpose of changing its r	egistered office or re	egistered agent, or both, in	the State of Florida. I am fam	illiar with, and accep	Ħ	
SIGNATURE .	Signature, typed or prints Taline of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature	required when reinstating)	4/18/ DATE	07		
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund Co		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIREC	CTORS-IN 10		
TITLE	D	☐ Delete	TITLE	Pb.	4	Change	an	
NAME	GONZALEZ, JORGE		NAME	Targe GOX	JALBIN #	210/	1	
STREET ADDRESS CITY-ST-ZIP	12400 NW 11TH LN. #2101 MIAMI, FL 33182		STREET ADDRESS CITY-ST-ZIP	3400 NW	ファスレムル チェ	2701		
	MIAMI, FL 33182		<u> </u>	TIKMI, FA	123/82.	Change Addition		
title Name		Delete	TITLE NAME	Fiedad H.	Blus-Riza	Johange (personing	<i>,</i> ,,,	
STREET ADDRESS			STREET ADDRESS	12478 NW	17 KW # 19	28		
CITY-ST-ZIP			CITY-ST-ZIP	Hirmi, FL	33182		لسب	
TITLE		☐ Delete	TITLE -	7	,	Change Addition	on ·	
NAME	·		NAME	Didier 1/1	orales i.	102		
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	Jagos NW	// th h N # 0	-,02		
CITY-ST-ZIP				Kranc, Fr	L. 20182.	Change Addition		
TITLE NAME		L.J Delete	TITLE NAME	Elnisa Gil	1040016	J Change (192) Accent	JII.	
STREET ADDRESS			STREET ADDRESS	12482 1111	11 20			
CITY-ST-ZIP			CITY-ST-ZIP	Eloisa Ech 12492 NW Minni, FA	33182.			
TITLE		☐ Delete	TITLE	7		Change Addition	011	
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZiP			CITY-ST-ZIP		F	Change C Addition		
TITLE		L. Detete	TITLE NAME		Ĺ	☐ Change ☐ Addition	J11	
NAME STREET ADDRESS			STREET ADORESS					
CITY-ST-ZIP			CITY-ST-ZIP					
12. I hereby indicated of the co	certify that the information supplied with on this report or supplies ental report is portation or the regeiver of trustee empressions of the sections of the section of the sectio	this filing does not qualify for true and accurate and that m weepd to execute this report is	the exemptions cor ny signature shall ha as required by Chap	ntained in Chapter 119, Flor we the same legal effect as i oter 617, Florida Statutes; an	ida Statutes. I further certify f made under oath; that I am d that my name appears in E	that the information an officer or director Block 10 or Block 11 i	r if	