

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 09, 2003 8:00 am
Secretary of State

05-06-2003 90033 005 ****70.00

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1. Entity Name
VISTA ALEGRE TOWNHOMES VILLAS PROPERTY OWNERS ASSOCIATION, INC.

00047614

Principal Place of Business Mailing Address
% COURTESY PROPERTY MANAGEMENT, INC.
13250 S.W. 135TH AVENUE
MIAMI FL 33186 % COURTESY PROPERTY MANAGEMENT, INC.
13250 S.W. 135TH AVENUE
MIAMI FL 33186



2. Principal Place of Business 3. Mailing Address

CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **65-0718062** 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

SKRLD, INC.
201 ALHAMBRA CIRCLE, STE. 1102
CORAL GABLES FL 33134

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

FILE NOW: FEE IS \$61.25

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 **VSD** Delete
NAME **NOEL, JEAN CLAUDE**
STREET ADDRESS **15321 SW 133 PLACE**
CITY-ST-ZIP **MIAMI FL 33177**

TITLE **TD** Delete
NAME **MELARRED, ISSAC**
STREET ADDRESS **13358 SW 152 STREET**
CITY-ST-ZIP **MIAMI FL 33177**

TITLE **PD** Delete
NAME **RODRIGUEZ, ANDY**
STREET ADDRESS **15490 SW 134 PLACE #511**
CITY-ST-ZIP **MIAMI FL 33177**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **President** Change Addition
NAME
STREET ADDRESS **15321 SW 133 Pl. 1003**
CITY-ST-ZIP **Miami, FL 33177**
Maria Suarez

TITLE **Vice President** Change Addition
NAME **Isaac Melammed**
STREET ADDRESS **13358 SW SW 152 St., 2902**
CITY-ST-ZIP **Miami FL 33177**

TITLE **Director** Change Addition
NAME **Andy Rodriguez**
STREET ADDRESS **15490 SW 134 Pl., 511**
CITY-ST-ZIP **Miami, FL 33177**

TITLE **Secretary** Change Addition
NAME **Kareemah Cole**
STREET ADDRESS **13371 SW 153 Str., 1104**
CITY-ST-ZIP **Miami, FL 33177**

TITLE **Treasurer** Change Addition
NAME **Enrique Sanchez**
STREET ADDRESS **15250 SW 134 Pl.**
CITY-ST-ZIP **Miami, FL 33177**

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 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 IIRs empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)