

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2004 8:00 am
Secretary of State

03-25-2004 90030 001 ****61.25

DOCUMENT # N96000005581

1. Entity Name
**DEVONAIRE COMMERCE CENTER III CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
12513 SW 130TH ST
MIAMI, FL 33186

Mailing Address
12513 SW 130TH ST
MIAMI, FL 33186

34000000



2. Principal Place of Business
12517 SW 130th ST
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

03172004 Chg-NP CR2E037 (10/03)

City & State
Miami, FL

City & State

4. FEI Number
65-0710659

Applied For
Not Applicable

Zip
33186

Country
USA.

Zip

Country

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

6. Name and Address of Current Registered Agent

GOMEZ, GUILLERMO
12513 SW 130TH STREET
MIAMI, FL 33136

7. Name and Address of New Registered Agent

Name **GRISelda DE LA O.**
Street Address (P.O. Box Number is Not Acceptable)
12517 SW 130th ST
Miami
City **FL** Zip Code **33186**

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]

GRISelda DE LA O

3/17/04
DATE

Filing Fee is \$61.25
Due by May 1, 2004

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 **P** ☐ Delete
NAME **GUILLEAMO, GOMEZ**
STREET ADDRESS **12513 SW 130TH ST**
CITY-ST-ZIP **MIAMI, FL 33186**

TITLE **P** ☒ Change ☐ Addition
NAME **GRISelda DE LA O.**
STREET ADDRESS **12517 SW 130th ST**
CITY-ST-ZIP **Miami, FL 33186**

TITLE **VSTD** ☐ Delete
NAME **MARMORSTEIN, IRWIN**
STREET ADDRESS **12515 SW 130TH ST**
CITY-ST-ZIP **MIAMI, FL 33186**

TITLE **VSTD** ☒ Change ☐ Addition
NAME **FRANCISCO DE LA O.**
STREET ADDRESS **12517 SW 130th ST**
CITY-ST-ZIP **Miami, FL 33186**

TITLE **DT** ☐ Delete
NAME **MARMORSTEIN, RUTH**
STREET ADDRESS **12515 SW 130TH STREET**
CITY-ST-ZIP **MIAMI, FL 33186**

TITLE **TR** ☒ Change ☐ Addition
NAME **RAFAEL GOMEZ**
STREET ADDRESS **12509 SW 130th ST**
CITY-ST-ZIP **Miami, FL 33186**

TITLE **DT** ☐ Delete
NAME **IRMA GARCIA**
STREET ADDRESS **8520 S.W. 107TH AVE., A-1**
CITY-ST-ZIP **MIAMI, FL**

TITLE **Secretary** ☒ Change ☐ Addition
NAME **Carlos Ina**
STREET ADDRESS **12507 SW 130th ST**
CITY-ST-ZIP **Miami, FL 33186**

TITLE **DT** ☒ Delete
NAME **GARCIA, PEDRO**
STREET ADDRESS **13230 S.W. 17TH LANE, APT. 5**
CITY-ST-ZIP **MIAMI, FL**

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

TITLE **DT** ☒ Delete
NAME **CHICA, LIZARDO**
STREET ADDRESS **15077 S.W. 103RD TERRACE, APT. 8101**
CITY-ST-ZIP **MIAMI, FL**

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 like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/04 (305)2555732
Date Daytime Phone #