FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 12 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N96000005744 (5)

POINCIANA WEST NO. 2 CONDOMINIUM ASSOCIATION, IN C.

Principal Place of Business Mailing Address					1 - Section and sales of the desirence of the above about a series of the local and the section of the section and the section
2900 WEST 84TH STREET		2900 WEST 84TH STREET			3. Date Incorporated or Qualified
HIALEAH FL 330	116	HIALEAH FL 33016			11/08/1996
					4. FÉI Number Applied For
					65-0733096 Not Applicable
2. Principal Pr	ace of Business	2s. Mailing Address	2a. Mailing Address		5. Certificate of Status Desired \$8.75 Additional
21		26			Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be
22		27			Trust Fund Contribution
City & State		City & State			7. Is this nonprofit corporation a homeowners association? Yes \sum No
Zip Country		Zip Country		ntrv	8. This corporation owes or has paid the current year Intangible
24	25	29	30	, y	Personal Property Tax due June 30. Yes No
241	9. Name and Address of Curre		190]		10. Name and Address of New Registered Agent
		· · · · · · · · · · · · · · · · · · ·		81 Name	Torge Luis Castaneda
HERRERA, CARLOS JR				82 Street Ad	ddress # O. Boy Number is Not Acceptable)
2900 WEST 84TH STREET				2 9	ddress (P.O. Box Number is Not Acceptable)
HIALEAH FL 33016				83 4	DT # 119
***************************************				84 City	85 Zip.Code
				~ / /-/	+1ALPAH FL 33618
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered.					
Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered arount or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Fjorida Statutes.					
		100000	-612	C 47 16	948 X9
Signature, typed or printed name of registered agent and title if applicable (NOTE			TE: Registered	Agent signature req	equired when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AF	ND DIRECTORS DELETE	1.1 TD	115	Change Addition
	PS TD Herrer a, Carlos Jr	W-SOLLETT.	1.0 N	11	Elia Luis Costanzale T.
NAME Street address	2900 WEST 84TH STREET			REET ADDRESS	1901 W. 80 117. 4119
CITY-ST-ZIP	HALEAH FL 33016			TY-ST-ZIP	4101896. FL 33018
TITLE	D	DELETE	2.1 TI		☐ Change ☐ Addition
NAME	HERRERA, HERMINIA	▼ -	2.2 N/	1.9	Jéronica Remis
STREET ADDRESS	2900 WEST 84TH STREET		2.3 ST	REET ADDRESS	PAS W. FO MAN Street # 22x
CITY-ST-ZIP	HIALEAH FL 33016	_	2.4 C	ITY-ST-ZIP	HIALEAH, PL. 33018
TITLE	D	DELETE	3.1 TI		D.S. Change Addition
NAME	RIVERO, LUISA M	•	3.2 N/	IME 👗	KISOG LAM
STREET ADDRESS	2900 WEST 84TH STREET		3.3 ST		LYON W. BO STIECT, The
CITY-ST-ZIP	HIALEAH FL 33016		3.4. C		Haleah, FL. 33018
TITLE		☐ DELETE	4.1 TI	TLE	☐ Change ☐ Addition
NAME			4. 2 N	AME	
STREET ADDRESS			4.3 ST	REET ADDRESS	
CITY-ST-ZIP		F-1		TY-ST-ZIP	
TITLE		☐ DELETE	5.1 TI		Change Addition
NAME			5.2 N	I .	
STREET ADDRESS				REET ADORESS	
CITY ST-ZIP		T DELETE		TY-ST-ZIP	Change Addition
TITLE	÷-	DELETE	6.1 TI	1	Change Addition
NAME			6.2 N/	1	
STREET ADDRESS			- 1	REET ADDRESS	
CITY-ST-ZIP			6.4 CI	TY-ST-ZIP	

14. 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 annual report or supplemental annual 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 controlled on this entire 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 controlled on this entire 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 controlled on this entire 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 controlled on this entire 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 controlled on this entire 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 controlled on this entire true.