

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2007 8:00 am
Secretary of State

03-28-2007 90010 047 ****61.25

DOCUMENT # N96000006031

1. Entity Name
PUERTO BELLO CONDOMINIUM NO. 2 ASSOCIATION, INC.



Principal Place of Business
**UNLIMITED PROPERTY MANAGEMENT, LLC
7655 NW 50 ST
MIAMI, FL 33166**

Mailing Address
**UNLIMITED PROPERTY MANAGEMENT, LLC
7655 NW 50 ST
MIAMI, FL 33166**



2. Principal Place of Business - No P.O. Box #

**L+C Royal Management
Suite, Apt. #, etc.
12301 NW 7th Lane**

3. Mailing Address

**L+C Royal Management
Suite, Apt. #, etc.
12301 NW 7th Lane**

03042007 Chg-NP CR2E037 (12/06)

City & State
Miami Florida

City & State
Miami Florida

4. FEI Number
65-0736410

Applied For
Not Applicable

Zip
33182

Country
USA

Zip
33182

Country
USA

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

6. Name and Address of Current Registered Agent

**UNLIMITED PROPERTY MGMT, LLC
7655 NW 50 ST
MIAMI, FL 33166**

7. Name and Address of New Registered Agent

Name **L+C Royal Management Corporation**

Street Address (P.O. Box Number is Not Acceptable)

12301 NW 7th Lane

City **Miami**

FL

Zip Code **33182**

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

Jose Luis Lopez President 3/24/07

**Filing Fee is \$61.25
Due by May 1, 2007**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
BATTLE, KAREN
1151 NW 124 AVE UNIT 2213
MIAMI, FL 33182** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
Cynthia de Vega
1191 NW 124 Ave.
Miami, FL 33182** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD - PD
DELA HOZ, EDGARDO
1162 NW 124 AVE UNIT 2307
MIAMI, FL 33182** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
De la Hoz, Edgardo
1162 NW 124 Ave.
Miami, Florida 33182** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SARGENTONI, MARCELO
1170 NW 124 AVE UNIT 2309
MIAMI, FL 33182** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
Diego Manoyoma
1174 NW 124 Ave
Miami, FL 33182** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

Edgardo de la Hoz President 3/24/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #