

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

00245200

DOCUMENT # **N96000006448**

1. Entity Name  
**PENINSULA HOUSING DEVELOPMENT INC. XII**



FILED

03 MAY -1 AM 10:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CHECK HERE IF MAKING CHANGES

Principal Place of Business  
**1223 S W 4TH STREET  
THIRD FLOOR  
MIAMI FL 33134  
US**

Mailing Address  
**1223 S W 4TH STREET  
SECOND FLOOR  
MIAMI FL 33135  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **65-0721533**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**DIAZ, GUARIONE M  
1223 SW 4TH STREET  
MIAMI FL 33135**

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	<b>PD</b>	<input type="checkbox"/> Delete
NAME	<b>DIAZ, GUARIONE M</b>	
STREET ADDRESS	<b>1223 SW 4TH ST</b>	
CITY-ST-ZIP	<b>MIAMI FL 33135</b>	
TITLE	<b>SD</b>	<input type="checkbox"/> Delete
NAME	<b>SANTANA, CRISTINA</b>	
STREET ADDRESS	<b>1223 SW 4TH AVE</b>	
CITY-ST-ZIP	<b>MIAMI FL 33135</b>	
TITLE	<b>TD</b>	<input type="checkbox"/> Delete
NAME	<b>SWITZER, RAQUEL C</b>	
STREET ADDRESS	<b>1390 S DIXIE HWY, #1108</b>	
CITY-ST-ZIP	<b>CORAL GABLES FL 33146</b>	
TITLE	<b>VPD</b>	<input type="checkbox"/> Delete
NAME	<b>PAZOS, ANDRES</b>	
STREET ADDRESS	<b>1223 SW 4TH ST</b>	
CITY-ST-ZIP	<b>MIAMI FL 33135</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>FABREGAS, JOSE</b>	
STREET ADDRESS	<b>1223 SW 4 STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL 33135</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>BARRETO, MARICKENA</b>	
STREET ADDRESS	<b>1223 SW 4 STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL 33135</b>	

*See Attached*

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>100017822901</b>	
STREET ADDRESS	<b>05/01/03--01049--002</b>	
CITY-ST-ZIP	<b>**61.25</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 REQUIRED

04-24-2003 305-642-3634

CR2E037 (10/02)

**NAME**

**ADDRESS**

DIAZ, Guarione M.  
Director and President

1223 S.W. 4<sup>th</sup> Street  
Miami, FL 33135  
Phone #: (305) 642-3484  
Fax #: (305) 642-9122

PAZOS, Andres  
Director and  
Executive Vice-President

1223 S.W. 4<sup>th</sup> Street  
Miami, FL 33135  
Phone #: (305) 642-3484  
Fax #: (305) 642-9815

SANTANA, Cristina  
Director and Secretary

1223 S.W. 4<sup>th</sup> Street  
Miami, FL 33135  
Phone #: (305) 642-3484  
Fax #: (305) 642-9122

SWITZER, Raquel C.  
Director and Treasurer

Switzer & Switzer  
1309 South Dixie Highway Suite 660  
Miami, FL 33146  
Phone #: (305) 663-3566  
Fax #: (305) 665-3060

BARRETO, Marielena  
Director

1223 S.W. 4<sup>th</sup> Street  
Miami, FL 33135  
Phone #: (305) 642-3634  
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NAVARRO, Marta  
Director

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Fax #: (305) 642-5094

GALAN, Juan  
Director

355 Cocoplum Road  
Miami, FL 33143  
Phone #: (305) 662-5780  
Fax #: (305) 662-5780