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May 05 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000003085 (4)

1. Corporation Name

ALHAMBRA GARDENS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

5325 WEST 26TH AVENUE
APARTMENT #6
HIALEAH FL 33016

5325 WEST 26TH AVENUE
APARTMENT #6
HIALEAH FL 33016

3. Date Incorporated or Qualified

06/10/1997

4. FEI Number

65-0759499

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 P.O. BOX 110548

22 City & State

27 Suite, Apt. #, etc.

23 City & State

28 Hialeah, FL

24 Zip

Country

29 Zip

Country

25

26

3011

30

U.S.A

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENITO, LAURO L
5325 WEST 26TH AVENUE
APARTMENT #6
HIALEAH FL 33016

81 Name

RAMOS, HUMBERTO

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

5325 West 26th Avenue

83

Apart, # 5

84 City

Hialeah

FL

85

Zip Code 33016

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 office or registered agent, 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, Florida Statutes.

SIGNATURE *Humberto Ramos*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME BENITO, LAURO L
STREET ADDRESS 5325 WEST 26TH AVENUE, APT. #6
CITY-ST-ZIP HIALEAH FL 33016

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME RAMOS, HUMBERTO
1.3 STREET ADDRESS 5325 W 26th Ave Apt. 5
1.4 CITY-ST-ZIP HIALEAH, FL. 33016

TITLE VPTD ☒ DELETE
NAME UNDERWOOD, RUTH
STREET ADDRESS 5305 WEST 26TH AVENUE, APT. #13
CITY-ST-ZIP HIALEAH FL 33016

2.1 TITLE SD ☒ Change ☐ Addition
2.2 NAME KING, HECTOR
2.3 STREET ADDRESS 5308 W 26th Ave Apt. 8
2.4 CITY-ST-ZIP HIALEAH, FL. 33016

TITLE VPSD ☒ DELETE
NAME ROBLES, REINA E
STREET ADDRESS 5305 WEST 26TH AVENUE, APT. #13
CITY-ST-ZIP HIALEAH FL 33016

3.1 TITLE TD ☒ Change ☐ Addition
3.2 NAME UNDERWOOD, RUTH
3.3 STREET ADDRESS 5305 W 26th Ave. Apt. # 13
3.4 CITY-ST-ZIP HIALEAH, FL. 33016

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *V. [Signature]*

04-14-1998 (205) 822 1201

CR2E037 (10/97)