

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 91007 001 ****70.00

DOCUMENT # **N97000005989**

1. Entity Name

**DEVONAIRE Commerce Center II
Condominium Association, Inc**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**DEVONAIRE Commerce Center II
Condominium Association, Inc
12496 SW 128 ST BAY 108**

3. Mailing Address

**12496 SW 128 STREET
BAY 108**

DO NOT WRITE IN THIS SPACE

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

4. FEI Number

65-0813893

Applied For

Not Applicable

Zip

33186

Country

DAVE

Zip

33186

Country

DAVE

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Street Address

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

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

FEE IS \$61.25

Initial or Amended UBR

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	MANAGER PD
NAME	MORGADO, ANDRES L
STREET ADDRESS	12496 SW 128 ST 108
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	VPD
NAME	ALBERTO MEJIA
STREET ADDRESS	12496 SW 128 ST # 105
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	TD
NAME	Enalle Jorge
STREET ADDRESS	12496 SW 128 ST # 102
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	SD
NAME	MORGADO, SONIA
STREET ADDRESS	12496 SW 128 ST # 108
CITY-ST-ZIP	MIAMI, FL 33186

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

ANDRES L. MORGADO - 4/17/03 305-253-6364

CR2E037B (12/02)