


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90454 010 *****70.00

DOCUMENT # N9700C006595	
1. Entity Name MARTIN FINE VILLAS RESIDENT ASSOCIATION INC.	

Principal Place of Business MARTIN FINE VILLAS 1301 NW 7TH ST. #303 MIAMI FL 33125 US	Mailing Address 1301 NW 7TH ST. #303 MIAMI FL 33125 US
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2. Principal Place of Business MARTIN FINE VILLAS	3. Mailing Address 1301 NW 7TH ST
Suite, Apt. #, etc. 1301 NW 7TH ST. #303	Suite, Apt. #, etc. 303
City & State MIAMI, FLORIDA	City & State MIAMI, FLORIDA
Zip 33125	Country USA

1st MOORE CR2E037 (10/05)

4. FEI Number 65-0787794	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SONIA, SUAREZ 1301 NW 7TH ST. #304 MIAMI FL 33125	7. Name and Address of New Registered Agent Name SONIA SUAREZ Street Address (P.O. Box Number is Not Acceptable) 1301 N.W 7TH ST #304 City MIAMI, FLORIDA FL Zip Code 33125
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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 (if applicable) (NOTE: Registered Agent signature required when consenting) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SUAREZ, SONIA 1301 N.W. 7TH STREET, #304 MIAMI FL 33125 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD ROSALIA, DAUSA 1301 NW 7TH ST #214 MIAMI FL 33125 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD BIENVENIDO, VICENTE 1301 NW 7TH ST #204 MIAMI FL 33125 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ROSARIO, CASTRILLON 1301 NW 7TH ST #201 MIAMI FL 33125 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Sonia Suarez* 4/10/06 305-642-9206
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #