

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90187 004 ****61.25

DOCUMENT # N97000007033

1. Entity Name
VILLAGES OF MULGOBA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
2200 N.W. 102 AVE., #5
DORAL, FL 33172

Mailing Address
2200 N.W. 102 AVE., #5
DORAL, FL 33172



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0802123

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

S.P.M. GROUP, INC.
2200 N.W. 102 AVE., #5
DORAL, FL 33172

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

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

(NOTE: Registered Agent signature required when remaining)

DATE

**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
DP
BALDOR, NORMA
6995 W. 7TH AVENUE
HIALEAH, FL 33014 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Guillermo Briceño
6977 W 7 AVE
Hialeah, FL 33014. ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
BRICERTO, GUILLERMO
6977 W 7 AVE
HIALEAH, FL 33014 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Paul Somodevilla
6969 W 7 AVE
Hialeah, FL 33014. ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
MARTINEZ, ROSY
6959 W 7 AVE
HIALEAH, FL 33014 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Yvonna Monge
6991 W 7 AVE
Hialeah, FL 33014. ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Norma Baldor
6995 W 7 AVE
Hialeah, FL 33014. ☐ 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:

Guillermo Briceño 04/17/07 (30) 757-2476

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #