

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003205

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** WESTVIEW VILLAS-II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7020 WEST 35 AVENUE  
HIALEAH, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4354  
HIALEAH, FL 33014

**New Mailing Address:**

**FEI Number:** 65-0846030

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOHUIZ, MAIRA  
7020 WEST 35 AVENUE  
115  
HIALEAH, FL 33018 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** FUENTES, EDUARDO  
**Address:** 7020 W 35 AVE UNIT # 120  
**City-St-Zip:** HIALEAH, FL 33018

**Title:** T  
**Name:** LOHUIZ, MAIRA  
**Address:** 7020 W 35 AVE UNIT #115  
**City-St-Zip:** HIALEAH, FL 33018

**Title:** D  
**Name:** JIMENEZ, MICHAEL  
**Address:** 7020 W 35 AVE UNIT #109  
**City-St-Zip:** HIALEAH, FL 33018

**Title:** S  
**Name:** AVERHOFF, IBIS  
**Address:** 7020 W 35 AVE UNIT # 121  
**City-St-Zip:** HIALEAH, FL 33018

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** MAIRA LOHUIZ

T

04/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date