


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90173 002 \*\*\*\*61.25

<b>DOCUMENT # N98000006468</b> 1. Entity Name <b>PIAZZA VECCHIA PROPERTY OWNER'S ASSOCIATION, INC.</b>					
Principal Place of Business <b>C/O CARIBBEAN PROPERTY MANAGEMENT 12301 SW 132 COURT MIAMI, FL 33186</b>			Mailing Address <b>C/O CARIBBEAN PROPERTY MANAGEMENT 12301 SW 132 COURT MIAMI, FL 33186</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>RUBIN, JONATHAN 9360 SUNSET DRIVE SUITE 220 MIAMI, FL 33173</b>				Name Street Address (P.O. Box Number is Not Acceptable) City	
				<b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>BARBOZA, MONICA</b>		NAME	<b>Carlos Penalta</b>	
STREET ADDRESS	<b>10810 NW 51 LN</b>		STREET ADDRESS	<b>10893 NW 51 Trail</b>	
CITY-ST-ZIP	<b>MIAMI, FL 33178</b>		CITY-ST-ZIP	<b>Miami FL 33178</b>	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>COBIAN, MELINDA</b>		NAME	<b>Sara Torrealba</b>	
STREET ADDRESS	<b>5180 NW 108 PL</b>		STREET ADDRESS	<b>10874 NW 51 Trail</b>	
CITY-ST-ZIP	<b>MIAMI, FL 33178</b>		CITY-ST-ZIP	<b>Miami FL 33178</b>	
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>PEREZ, CARLOS</b>		NAME		
STREET ADDRESS	<b>5164 NW 108 COURT</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>MIAMI, FL 33178</b>		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>MADAY, RICK</b>		NAME		
STREET ADDRESS	<b>5182 NW 108 COURT</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>MIAMI, FL</b>		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>KEPNER, BRENDA</b>		NAME		
STREET ADDRESS	<b>1088 NW 51 TRAIL</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>MIAMI, FL 33178</b>		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>TORREALBA, SARAI</b>		NAME		
STREET ADDRESS	<b>10874 NW 51 TRAIL</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>MIAMI, FL 33178</b>		CITY-ST-ZIP		
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.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
				<small>Date</small>	
				<small>Daytime Phone #</small>	