

DOCUMENT # N99000000144

1. Entity Name

VILLA DORAL CONDOMINIUM NO. 1 ASSOCIATION, INC.

FILED
Jul 07, 2000 8:00 am
Secretary of State

06-05-2000 90021 040 ****61.25

Principal Place of Business

11030 N. KENDALL DR., SUITE 100
MIAMI FL 33176

Mailing Address

11030 N. KENDALL DR., SUITE 100
MIAMI FL 33176-1220

2. Principal Place of Business

3. Mailing Address

11936 SW 8 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI, FL

Zip

Country

Zip

Country

33184

USA

4. FEI Number

65-0903710

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

VENTO, WILLIAM

11030 N. KENDALL DR., SUITE 100
MIAMI FL 33176

7. Name and Address of New Registered Agent

Name

JESUS R. GONZALEZ

Street Address (P.O. Box Number is Not Acceptable)

11936 SW 8TH STREET

City

MIAMI

FL

Zip Code

33184

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

6/8/2000

FILE NOW:
FEE IS \$61.25

 9. Election Campaign Financing
 Trust Fund Contribution.

☐
**\$5.00 May Be
 Added to Fees**
**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Delete
PD	VENTO, WILLIAM	11030 N. KENDALL DR., SUITE 100	MIAMI FL 33176	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Delete
SD	AVILA, RIGOBERTO	11030 N. KENDALL DR., SUITE 100	MIAMI FL 33176	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Delete
TD	AVILA, YESENIA	11030 N. KENDALL DR., SUITE 100	MIAMI FL 33176	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change	☐ Addition
P	ANTHONY C. LAIDER	4724 NW 114 AVE UNIT 202	MIAMI, FL 33178		

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change	☐ Addition
T	ANGEL E. ALVAREZ	4724 N.W. 114 AVE UNIT 201	MIAMI, FL 33178		

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change	☐ Addition
S	LISSETTE A. CARLOS	4752 NW 114 AVE UNIT 203	MIAMI, FL 33178		

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☒ Addition
D	ERIKA GARDULLA	4748 NW 114 AVE UNIT 103	MIAMI, FL 33178		

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☒ Addition
D	PEDRO A. CHAVEZ	4748 NW 114 AVE UNIT 204	MIAMI, FL 33178		

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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/10/00

858-0887 x1225

CR2E037 (9/99)