## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000065668

Entity Name: MADRID APARTMENTS INC.

FILED Aug 20, 2009 Secretary of State

US

**Current Principal Place of Business: New Principal Place of Business:** 

541 S. ST. RD. 7 525 LAKESIDE DR.

POMPANO BEACH, FL 33060 #12 MARGATE, FL 33068 US

**New Mailing Address: Current Mailing Address:** 

541 S. ST. RD. 7 525 LAKESIDE DR.

POMPANO BEACH, FL 33060 US

MARGATE, FL 33068 US

FEI Number: 30-0041662 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WARD, ROSINA J WARD, ROSINA J 525 LAKESIDE DR. 900 N. OCEAN BLVD

POMPANO BEACH, FL 33060 US #19

POMPANO BEACH, FL 33062 US

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: ROSINA WARD 08/20/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

WARD, HARRY WARD, HARRY Name: Name: 900 N. OCEAN BLVD, #19 525 LAKESIDE DR. Address: Address:

City-St-Zip: POMPANO BEACH, FL 33062 US City-St-Zip: POMPANO BEACH, FL 33060 US

Title: VP/T Title: VP/T () Delete (X) Change ( ) Addition Name: CANFIELD, CJ Name: CANFIELD, CJ

541 S. ST. RD. 7, #12 3028 BIRKDALE Address: Address: MARGATE, FL 33068 US WESTON, FL 33332 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: () Change () Addition

GONZALEZ, ROBERT Name: Name: 101 N. STATE RD. 7. #119 Address: Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip:

Title: ( ) Delete Title: () Change () Addition

EMORY, MICHAEL Name: Name: Address: 888 S. ANDREWS AVE. #201 Address: City-St-Zip: MARGATE, FL 33316 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL-JEAN CANFIELD VP/T 08/20/2009