

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 01, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # P03000012704**

1. Entity Name  
**TUSCANY VILLAS DEVELOPERS, INC.**



Principal Place of Business  
**14600 S.W. 136RD STREET  
MIAMI, FL 33186**

Mailing Address  
**14600 S.W. 136RD STREET  
MIAMI, FL 33186**

**DO NOT WRITE IN THIS SPACE**



02212005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-3766221**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**HARRIS, ELLIOTT  
111 S.W. 3RD STREET  
6TH FLOOR  
MIAMI, FL 33130**

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IN THIS SPACE**

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 re-instating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	GARCIA-CARRILLO, MICHAEL
STREET ADDRESS	14600 S.W. 136RD STREET
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	VSD
NAME	CASTELLANOS, RAIMUNDO
STREET ADDRESS	14600 S.W. 136RD STREET
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	TD
NAME	GARCIA-CARRILLO, PEDRO JR.
STREET ADDRESS	14600 S.W. 136RD STREET
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	S
NAME	HARRIS, ELLIOTT
STREET ADDRESS	111 S.W. 3RD STREET, SIXTH FLOOR
CITY - ST - ZIP	MIAMI, FL 33130
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U000000283929  
04/01/05-80046-011 158.75

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IN THIS SPACE**

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 607, 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:**

*Elliott Harris*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Elliott Harris March 29, 2005 (305)3580146**

Date

Daytime Phone #