## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026149

Entity Name: VILLA GLADYS APARTMENTS, INC.

FILED Apr 10, 2004 Secretary of State

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

6301 COLLINS AVENUE 6301 COLLINS AVENUE

2507 2101

MIAMI BEACH, FL 33141 US MIAMI BEACH, FL 33141 US

Current Mailing Address: New Mailing Address:

P.O. BOX 414221

MIAMI BEACH, FL 33141 US

FEI Number: 54-2106331 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:

MONTES, ANTONIO MONTES, ANTONIO 6301 COLLINS AVE 6301 COLLINS AVE

2507 2101

MIAMI BEACH, FL 33141 US MIAMI BEACH, FL 33141 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: ANTONIO MONTES 04/10/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MONTES, MAYRA
 Name:
 MONTES, MAYRA

 Address:
 6301 COLLINS AVE #2507
 Address:
 6301 COLLINS AVE #2101

 City-St-Zip:
 MIAMI BEACH, FL 33141 US
 City-St-Zip:
 MIAMI BEACH, FL 33141 US

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

Name: MONTES, ANTONIO Name: MONTES, ANTONIO

Address: 6301 COLLINS AVENUE #2507 Address: 6301 COLLINS AVENUE #2101
City-St-Zip: MIAMI BEACH, FL 33141 US City-St-Zip: MIAMI BEACH, FL 33141 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MAYRA MONTES P 04/10/2004