


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 20, 2007 8:00 am**  
**Secretary of State**

02-20-2007 90044 011 \*\*\*150.00

DOCUMENT # P03000110367

1. Entity Name  
~~GRAND ABBACO DEVELOPMENT OF VILLAGE WEST CORPORATION~~



Principal Place of Business  
 2903 SALZEDO ST  
 CORAL GABLES, FL 33134-6618

Mailing Address  
 2903 SALZEDO ST  
 CORAL GABLES, FL 33134-6618

**DO NOT WRITE IN THIS SPACE**



02142007 No Chg-P CR2E034 (11/05)

4. FEI Number  
 20-0287835

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARRERO, JULIO C  
 2903 SALZEDO ST  
 CORAL GABLES, FL 33134-6618

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MARRERO, ROSA
STREET ADDRESS	2903 SALZEDO ST
CITY - ST - ZIP	CORAL GABLES, FL 331346618
TITLE	V
NAME	BENITEZ, ORLANDO
STREET ADDRESS	2903 SALZEDO ST
CITY - ST - ZIP	CORAL GABLES, FL 331346618
TITLE	S
NAME	MARRERO, ROSA
STREET ADDRESS	2903 SALZEDO STREET
CITY - ST - ZIP	CORAL GABLES, FL 33134
TITLE	T
NAME	MUSKAT, PHILLIP
STREET ADDRESS	2903 SALZEDO ST
CITY - ST - ZIP	CORAL GABLES, FL 331346618
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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 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: *Rosa Marrero*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_