

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000026378

FILED
Feb 24, 2011
Secretary of State

Entity Name: UMOJA VILLAGE MANAGER, INC.

Current Principal Place of Business:

1398 SW 1ST STREET
12TH FLOOR
MIAMI, FL 33135 US

New Principal Place of Business:

Current Mailing Address:

1398 SW 1ST STREET
12TH FLOOR
MIAMI, FL 33135 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BERMAN, STEPHANIE
1398 SW 1ST STREET
12TH FLOOR
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BERMAN, STEPHANIE
Address: 1398 SW 1ST STREET, 12TH FLOOR
City-St-Zip: MIAMI, FL 33135

Title: D
Name: OJEDA, ALAN
Address: 1000 BRICKELL AVENUE, SUITE 1015
City-St-Zip: MIAMI, FL 33131

Title: D
Name: MESSER, JOHN
Address: 801 BRICKELL AVENUE, SUITE 2450
City-St-Zip: MIAMI, FL 33131

Title: D
Name: QUICK, LINDA
Address: 6030 HOLLYWOOD BOULEVARD, #140
City-St-Zip: HOLLYWOOD, FL 33024

Title: D
Name: DANNER, STEPHEN
Address: 1200 BRICKELL AVENUE, SUITE 700
City-St-Zip: MIAMI, FL 33131

Title: D
Name: GARCIA, TERESITA
Address: 2601 S. BAYSHORE DRIVE, 10TH FLOOR
City-St-Zip: MIAMI, FL 33133

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE BERMAN

P

02/24/2011

Electronic Signature of Signing Officer or Director

Date