

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000035956

FILED  
Mar 04, 2010  
Secretary of State

**Entity Name:** VILLA ESPERANZA APARTMENTS, INC.

**Current Principal Place of Business:**

490 OPA LOCKA BLVD.  
SUITE 20  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

490 OPA LOCKA BLVD.  
SUITE 20  
OPA LOCKA, FL 33054

**New Mailing Address:**

**FEI Number:** 65-0793762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WASHINGTON, LYNN C ESQ.  
701 BRICKELL AVE., #2800  
MIAMI, FL 33131 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** WILLIAMS-BALDWIN, STEPHANIE  
**Address:** 490 OPA LOCKA BLVD.#20  
**City-St-Zip:** OPA LOCKA, FL 33054

**Title:** D  
**Name:** BARNETT, WILLIE  
**Address:** 6600 NW 27 AVENUE #109  
**City-St-Zip:** MIAMI, FL 33147

**Title:** D  
**Name:** LOGAN, WILLIE  
**Address:** 490 OPA LOCKA BLVD, STE 20  
**City-St-Zip:** OPA LOCKA, FL 33054

**Title:** D  
**Name:** SABIR, NASHID  
**Address:** 18350 N.W. 2 AVE. 5TH FLOOR  
**City-St-Zip:** MIAMI, FL 33169

**Title:** D  
**Name:** WILSON, PAULETTE  
**Address:** 15830 NW 17 COURT  
**City-St-Zip:** OPA LOCKA, FL 33054

**Title:** D  
**Name:** MILLER, JERRY  
**Address:** 8221 NW 198 STREET  
**City-St-Zip:** HIALEAH, FL 33015

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 WILLIAMS-BALDWIN

PD

03/04/2010

Electronic Signature of Signing Officer or Director

Date