# 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0100008445

Entity Name: PENINSULA HOUSING DEVELOPMENT, INC. XVI

## Current Principal Place of Business:

1223 SW 4 ST 2ND FLOOR MIAMI, FL 33135

## **Current Mailing Address:**

1223 SW 4 ST 2ND FLOOR MIAMI, FL 33135 US

## FEI Number: 02-0588063

## Name and Address of Current Registered Agent:

DIAZ, GUARIONE 1223 SW 4 ST 3RD FLOOR MIAMI, FL 33135 US Certificate of Status Desired: No

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

### **Officer/Director Detail :**

Title	DP	Title	DIRECTOR, AND SECRETARY		
Name	DIAZ, GUARIONE M	Name	MASVIDAL, SERGIO		
Address	1223 SW 4 ST	Address	6800 SW 80 TH AVENUE		
City-State-Zip:	MIAMI FL 33135	City-State-Zip:	MIAMI FL 33143		
Title	DIRECTOR	Title	DT		
Name	ALLEN, WILFREDO	Name	SWITZER, RAQUEL C		
Address	2250 SW 3RD AVENUE	Address	1360 S. DIXIE HWY ROOM # 355		
City-State-Zip:	SUITE # 100 MIAMI FL 33129	City-State-Zip:	CORAL GABLES FL 33146		
<b>T</b> .0.	D.	Title	D		
Title		Name	BARREIRO, GLADIS		
Name Address	NAVARRO, MARTA 1223 SW 4 ST	Address	2235 SW 8TH STREET APT.711		
City-State-Zip:	MIAMI FL 33135	City-State-Zip:	MIAMI FL 33135		
Title	DIRECTOR	Title	DIRECTOR		
Name	CUBELA , NOEL	Name	FERNANDEZ, LUIS		
Address	2414 SW 19TH TERRACE	Address	205 SW 23RD ROAD		
City-State-Zip:	MIAMI FL 33145	City-State-Zip:	MIAMI FL 33129		

## Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARTA NAVARRO		DIRECTOR	02/07/2014
	Electronic Signature of Signing Officer/Director Detail		Date

Electronic Signature of Signing Officer/Director Detail

## FILED Feb 07, 2014 Secretary of State CC8480892260

Date

## **Officer/Director Detail Continued :**

Title	DIRECTOR	
Name	RAMOS, MARCOS ANTONIO	
Address	2765 SW 32 COURT	
City-State-Zip:	MIAMI FL 33133-2844	