

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002379

**FILED**  
**Feb 04, 2015**  
**Secretary of State**  
**CC7268733685**

**Entity Name:** ALLAPATTAH COMMUNITY HOUSING II, INC.

**Current Principal Place of Business:**

1390 NW 24 AVE  
MIAMI, FL 33125

**Current Mailing Address:**

1390 NW 24 AVE OFFICE  
MIAMI, FL 33125

**FEI Number: 20-4617189**

**Certificate of Status Desired: Yes**

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

WEISS, JAY BESQUIRE  
9990 SW 77 AVE  
216  
MIAMI, FL 33156 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name BARRIOS, DAVID  
Address 18158 NW 89TH PLACE  
City-State-Zip: MIAMI LAKES FL 33018

Title VD  
Name BALBUENA, FRANCISCO M  
Address 9581 FOUNTAINBLEU #203  
City-State-Zip: MIAMI FL 33172

Title SD  
Name POMAR, ARMANDO  
Address 2257 NW NORTH RIVER DR  
City-State-Zip: MIAMI FL 33125

Title D  
Name FAJARDO, ALVARO  
Address 6039 COLLINS ACE, #633  
City-State-Zip: MIAMI BEACH FL 33140

Title D  
Name DUTTON, DOUGLAS  
Address 7863 W. 36TH AVE  
City-State-Zip: MIAMI FL 33018

Title TD  
Name TELLA, EDUARDO A  
Address 11337 NW 15 CT  
City-State-Zip: PEMBROKE PINES FL 33026

*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: DAVID BARRIOS**

**PRESIDENT**

**02/04/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date