2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mar 17, 2003 8:00 am Secretary of State DOCUMENT # 708885 1. Entity Name 03-17-2003 90085 003 ****61.25 PINETREE MANOR CONDOMINIUM, INC. Principal Place of Business Mailing Address 2858 PINETREE DR P.O. BOX 403503 MIAMI BEACH 33140 MIAMI BEACH FL 33140 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number NOT APPLICABLE Applied For Ζίρ Not Applicable Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MEIR, PANN 9455 BAY HARBOR TERR Street Address (R.O. Box Number is Not Acceptable) MIAMI FL 33154 City Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DVP TITLE Delete DIFELLOR TITLE GONZALEZ, HERMINIA NAME Change Addition YAACOV GROSS NAME STREET ADDRESS 2858 PINETREE DR. 4 3767 Chase Ave STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-7IP DST TITLE Delete TITLE NAME HERNANDEZ, XIMENA M Addition JUAN LOPES NAME STREET ADDRESS 2858 PINETREE DR #3 2858 PINETRES DR. #8 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP MIAMI BEACH FL 33140 TITLE DP _□ Delete - = -TITLE PANN. MEIR NAME Change ☐ Addition NAME STREET ADDRESS 9455 BAY HARBOR TERRACE #8-S STREET ADDRESS CITY-ST-ZIP BAY HARBOR ISLANDS FL 33154 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE NAME ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED