

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

**FILED**  
**Feb 03, 2003 8:00 am**  
**Secretary of State**

02-03-2003 90159 003 \*\*\*\*\*61.25

**DOCUMENT # 719117**

1. Entity Name

**RENE CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**7634 "E" S.W. 55 AVENUE  
MIAMI FL 33143**

Mailing Address

**7634 "E" S.W. 55 AVENUE  
MIAMI FL 33143**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1299992**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**RAY, BARBARA  
% ARVIDA REALTY SERVICES  
12695 S DIXIE HIGHWAY  
MIAMI FL 33156**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

**40 COLDWELL BANKER**

**12695 S. DIXIE HIGHWAY**

City

**MIAMI, FL**

FL

Zip Code

**33156**

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 the obligations of registered agent.

SIGNATURE

*Barbara A. Ray a Property Manager*

**1/28/03**

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  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **HUNTER, HARRY**  
STREET ADDRESS **7620 SW 55TH AVENUE, #A**  
CITY-ST-ZIP **MIAMI FL 33143**

TITLE **TD** ☒ Delete  
NAME **SANJAY, ROY**  
STREET ADDRESS **7734 SW 55 AVE**  
CITY-ST-ZIP **MIAMI FL 33143**

TITLE **D** ☒ Delete  
NAME **WELLER, ED**  
STREET ADDRESS **7734 SW 55TH AVENUE**  
CITY-ST-ZIP **MIAMI FL 33143**

TITLE **D** ☒ Delete  
NAME **PLANAS, GEORGE**  
STREET ADDRESS **7650 SW 55TH AVENUE**  
CITY-ST-ZIP **MIAMI FL 33143**

TITLE **D** ☐ Delete  
NAME **ASTURIAS, LUIS**  
STREET ADDRESS **7634 SW 55TH AVENUE, #D**  
CITY-ST-ZIP **MIAMI FL 33143**

TITLE **D** ☐ Delete  
NAME **AUSTIN, L. CRAIG**  
STREET ADDRESS **7621 SW 55TH AVENUE, #A**  
CITY-ST-ZIP **MIAMI FL 33143**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME **174**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
NAME **TAKSIR, CANDACE**  
STREET ADDRESS **7720 SW 55 AVE, UNIT A**  
CITY-ST-ZIP **MIAMI, FL 33143**

TITLE **D** ☐ Change ☒ Addition  
NAME **DICKHAUS, BILL**  
STREET ADDRESS **5510 SW 76 ST UNIT B**  
CITY-ST-ZIP **MIAMI, FL 33143**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **(Y) SHARON D. HUNTER, Pres. 1/28/03 (305) 235-3411 x23**

CR2E037 (10/02)