2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#719308

Entity Name: MICHIGAN TOWERS CONDOMINIUM, INC.

Apr 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 716 MICHIGAN AVE MIAMI BEACH, FL 33139 **Current Mailing Address: New Mailing Address:** 716 MICHIGAN AVE 716 MICHIGAN AVE MIAMI BEACH, FL 33139 204 MIAMI BEACH, FL 33139 FEI Number: 59-1554536 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARENCIAIA, LAZARO ARENCIBIA, LAZARO MR. 716 MICHIGAN AVE. 716 MICHIGAN AVE. **APT 404** APT 404 MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 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: LAZARO ARENCIBIA 04/01/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LAZARO, ARENCIBIA Name: Name: 716 MICHIGAN AVE APT #404 Address: Address: City-St-Zip: MIAMI BCH, FL 33139 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MENDEZ, DAISY, Name: Address: 716 S MICHIGAN AVE APT 204 Address: City-St-Zip: MIAMI, FL 33139 City-St-Zip: Title: () Delete Title: () Change () Addition STERLING, JOSEPH Name: Name: 716 MICHIGAN, AVE #J04 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: () Delete Title: Title: () Change () Addition Name: ESTRUMSA, JENNIFER Name: 716 MICHIGAN AVE #504 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: Title: () Delete (X) Change () Addition GIL, RENE SIEBERT, MICHAEL MR Name: Name: 716 MICHIGAN AVE 202 716 MICHIGAN AVE 401 Address: Address: City-St-Zip: MIAMI BEACH, FL City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LAZARO ARENCIBIA PRES 04/01/2002