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

DOCUMENT# 721439

1. Entity Name

KENDALL ACRES CONDOMINIUM, INC ._ .



FILED Jun 04, 2004 8:00 am Secretary of State 06-04-2004 90001 004 ****61.25

						TH				

54056647

Principal Place of Busi	iness	3. Mailing Address								
10375 A S. Suite, Apt. #, etc.	W. 88th St	10375-A S. Suite, Apt. #, etc.	W.	88th St.	. DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. FEI Number		Applied For			
Miami. Fl		Miami, Fl			<u>59-1443542</u>		Not Applicable			
Miami, Fl 33176	Country Miami-Dade	33176		untry mi-Dade	5. Certificate of Status Desired	\$8.75 ee Req	Additional quired			
					7. Name and Address of Current Registered	Agent				
	SO MOTAVI			Name Drucella Van Houten						
L	O-NOT-WI	(IIE	and a superior	Street Address (P.O. Box Number is Not Acceptable) 10375-A S. W. 88th St						
1	N THIS SP	ACE								
1	n i fiið of <i>i</i>	AUE		N.						
				City Mia	mi FL		Code 3176			
The above named entitle the obligations of regis		the purpose of changing its	s register	ed office or register	ed agent, or both, in the state of Florida-I am fa	miliar w	ith; and accept			
the obligations of regis	stered agent.	1			/	0!	5/28/04			

Drucella Van Houten, Property Manager

\$5 00 May Bo

Initial or Amended UBR Trust Fund Co	ontribution. Added to Fees Florida Department of State
10. OFFICERS AND DIRECTORS	
TITLE NAME SIREET ADDRESS CITY-ST-ZIP Vincent Zubero 10359 S.W. 88th St. A-5 Miami, Fl 33176	TITLE NAME STREET ADDRESS CITY-ST-ZIP
NAME Nancilu F. Stewart STREET ADDRESS 10381 S.W. 88th St. M-3 CITY-SI-ZIP Miami. Fl 33176	CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE VD NAME Robert Korschun STREET ADDRESS 10353 S.W. 88th St. BB-7 CITY-ST-ZIP Miami, F1 33176	ITILE NAME STREELADDRESS CITY-ST-72P DO NOT WRITE
NAME Carole A. Bell SIREET ADDRESS 8139 S.W. 82nd Pl CITY-ST-ZIP Miami, Fl 33176	INTHIS SPACE STREET ADDRESS CITY-ST-ZIP
TITLE TD NAME Andy lopez STREET ADDRESS 10383 S.W.88th St. N-5 CITY-ST-ZIP Miami, Fl 33176	TITLE NAME STREET ADDRESS CITY: ST: ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY - ST- ZIP

12. Thereby 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 on 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 on an

Nancilu F. Strwart, Vice President 05/28/04