2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **724252** Feb 28, 2000 8:00 am 1. Entity Name **Secretary of State** VALENCIA TERRACE CONDOMINIUM ASSOCIATION, INC. 02-28-2000 90065 040 ****61.25 Principal Place of Business Mailing Address 6825 WEST FLAGLER STREET 6825 WEST FLAGLER STREET MIAMI FL 33144-2849 MIAMI FL 33144-2830 HS 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1432062 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ANGUITA, SILVIA 6825 W. FLAGLER STREET, APT. 108 **MIAMI FL 33144** Zip Code City FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITLE ☐ Delete TITLE NAME anguita, silvia NAME STREET ADDRESS STREET ADDRESS 6825 W FLAGLER #108 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144 SD ☐ Delete TITLE Change ■ Addition TITLE ANGUITA, SILVIA NAME NAME STREET ADDRESS 6825 W. FLAGLER ST., APT. 108 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144 PD TITLE Change ☐ Addition ☐ Delete TITLE HERNANDEZ, ISMAEL NAME NAME STREET ADDRESS STREET ADDRESS 6825 W FLAGLER ST, SUITE 405 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33144** Change ☐ Addition Delete TITLE TITLE GALVEZ, SANTIAGO NAME NAME STREET ADDRESS STREET ADDRESS 6825 W FLAGLER ST, SUITE 406 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144 Change ☐ Addition □ Delete TITLE DE VILLIERS, EDITH NAME NAME STREET ADDRESS STREET ADDRESS 6825 W. FLAGLER ST. APT. 406 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144 Change ☐ Addition VT _____ T Delete TITLE TITLE GALVEZ, LUISA NAME NAME 6825 WEST FLAGLER STREET #406 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144-2830

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: (SinvanAnguita) REQUIRED

Silvin beguith 2-28-00 305 261708