

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

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90226 005 ****61.25

DOCUMENT # 724252

1. Entity Name

VALENCIA TERRACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**6825 WEST FLAGLER STREET
MIAMI FL 33144-2833
US**

Mailing Address

**6825 WEST FLAGLER STREET
MIAMI FL 33144-2833
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1432062**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ANGUITA, SILVIA
6825 W. FLAGLER STREET, APT. 108
MIAMI FL 33144**

7. Name and Address of New Registered Agent

Name **ABRAHAM, LOURDES**

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

6825 W. FLAGLER ST., APT. #206

City **MIAMI**

FL

Zip Code **33144-2833**

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 **Loude Abraham - LOURDES ABRAHAM - TREASURER/SECRETARY**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE **2-10-03**

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 **TD** ☒ Delete
NAME **ANGUITA, SILVIA**
STREET ADDRESS **6825 W FLAGLER #108**
CITY-ST-ZIP **MIAMI FL 33144**

TITLE **SD** ☒ Delete
NAME **ANGUITA, SILVIA**
STREET ADDRESS **6825 W. FLAGLER ST., APT. 108**
CITY-ST-ZIP **MIAMI FL 33144**

TITLE **PD** ☒ Delete
NAME **HERNANDEZ, ISMAEL**
STREET ADDRESS **6825 W FLAGLER ST, SUITE 405**
CITY-ST-ZIP **MIAMI FL 33144**

TITLE **VPD** ☒ Delete
NAME **PARADELA, RAMON**
STREET ADDRESS **6825 W. FLAGLER ST. APT. 310**
CITY-ST-ZIP **MIAMI FL 33144**

TITLE **VS** ☐ Delete
NAME **GUTIERREZ, MARISA**
STREET ADDRESS **6825 W. FLAGLER ST. APT. 303**
CITY-ST-ZIP **MIAMI FL 33144**

TITLE **VT** ☐ Delete
NAME **GALVEZ, LUISA**
STREET ADDRESS **6825 WEST FLAGLER STREET #406**
CITY-ST-ZIP **MIAMI FL 33144-2833**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TD** ☒ Change ☐ Addition
NAME **ABRAHAM, LOURDES**
STREET ADDRESS **6825 W. FLAGLER ST., #206**
CITY-ST-ZIP **MIAMI, FL 33144-2833**

TITLE **SD** ☒ Change ☐ Addition
NAME **ABRAHAM, LOURDES**
STREET ADDRESS **6825 W. FLAGLER ST., #206**
CITY-ST-ZIP **MIAMI, FL 33144-2833**

TITLE **PD** ☒ Change ☐ Addition
NAME **RODRIGUEZ, EMILIO**
STREET ADDRESS **6825 W. FLAGLER ST., #403**
CITY-ST-ZIP **MIAMI, FL 33144-2833**

TITLE **VPD** ☒ Change ☐ Addition
NAME **GALVEZ, SANTIAGO**
STREET ADDRESS **6825 W. FLAGLER ST., #406**
CITY-ST-ZIP **MIAMI, FL 33144-2833**

TITLE **VS** ☐ Change ☐ Addition
NAME **REMAINS THE SAME**
STREET ADDRESS **REMAINS THE SAME**
CITY-ST-ZIP **REMAINS THE SAME**

TITLE **VT** ☐ Change ☐ Addition
NAME **REMAINS THE SAME**
STREET ADDRESS **REMAINS THE SAME**
CITY-ST-ZIP **REMAINS THE SAME**

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: **LOURDES ABRAHAM** **Loude Abraham** **2/10/03** **H: (305) 267-2813**

CR2E037 (10/02)