2002 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # 727885** May 19, 2002 8:00 am Secretary of State KENNEDY HOUSE CONDOMINIUM, INC. 05-19-2002 90160 016 ****61.25 Principal Place of Business Mailing Address 1865 KENNEDY CAUSEWAY 1865 KENNEDY CAUSEWAY NO BAY VILLAGE FL 33141 NO BAY VILLAGE FL 33141 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1806177 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent dres-Montalus-Street Address (P.O. Box Number is Not Acceptable) MCGLOHON, MARIA 1865 KENNEDY CAUSEWAY NO BAY VILLAGE FL 33141 8. The above named entity submit this statement of the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE Signature, types me of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITI F ☐ Change MCGLOHON, MARIA NAME NAME Montalvo, Andres STREET ADDRESS 1865 KENNEDY CAUSEWAY 14G 5 Kerinedy Causeway STREET ADDRESS CITY-ST-ZIP NO BAY VILLAGE FL 33141 CITY-ST-ZIP TITLE **VPD** Delete TITLE Change Addition NAME DIAZ, IGNACIO STREET ADDRESS 1865 KENNEDY CAUSEWAY 5H STREET ADDRESS K65 Kennedy Causeway # CITY-ST-ZIP NO BAY VILLAGE FL 33141 CITY-ST-ZIP Delete TITLE Change Addition NAME PULPEIRO, JORGE NAME STREET ADDRESS 1865 KENNEDY CAUSEWAY 21 STREET ADDRESS CITY-ST-ZIP NO BAY VILLAGE FL 33141 CITY-ST-ZIP TITLE TD Delete TITLE Addition NAME SANDEL, LUCILLE Oteiza, Marceles NAME STREET ADDRESS 1865 KENNEDY CAUSEWAY 11J STREET ADDRESS CITY-ST-ZIP NO BAY VILLAGE FL 33141 CITY-ST-ZIP TITLE D Delete TITLE

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 changed, or on an attachment with an address, with all other like empowered.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Temporini

SIGNATURE:

RODRIGUEZ, NIBIA

1865 KENNEDY CAUSEWAY 14L

NO BAY VILLAGE FL 33141

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

STONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTO

☐ Delete

4-01-2002 (00) 866-469/

☐ Addition