

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 17, 2002 8:00 am
Secretary of State

05-20-2002 90102 011 ****61.25

DOCUMENT # 729197

1. Entity Name

MADRID TOWERS CONDOMINIUM, INC.

Principal Place of Business

1650 LE JEUNE ROAD
 CORAL GABLES FL 33134

Mailing Address

1650 LE JEUNE ROAD
 CORAL GABLES FL 33134-3848
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2761341

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALIDO, MARIA ELENA
 1650 LE JEUNE ROAD APT. 302
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: **Maria Rodriguez**
 Street Address (P.O. Box Number Not Acceptable): **1650 Le Jeune Rd #201**
 City: **Coral Gables** FL Zip Code: **33134**

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

Maria Rodriguez

(NOTE: Registered Agent signature required when reinstating)

04/24/02
 DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PSD	BALIDO, MARIA ELENA	1650 LE JEUNE RD. #302	CORAL GABLES FL	<input checked="" type="checkbox"/>
TSD	RODRIGUEZ, MARIA	1650 LEJEUNE RD #201	CORAL GABLES FL 33134	<input type="checkbox"/>
VD	DE CASTRO, MARIA	1650 LE JEUNE RD #103	MIAMI FL 33134	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
President	Alex Guevedo	5782 S.W. 50 Street D	Miami, FL 33155	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President	Margate Cullen	1650 Le Jeune Rd #205 D	Coral Gables, FL 33134	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Maria Rodriguez*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24/02 DATE
ETT. 292
305-374-0255 Daytime Phone #

CR2E037 (9/01)