

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

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90113 038 ****61.25

DOCUMENT # 730464

1. Entity Name

The Golfview Club at Fontainebleau Park
Condominium No.1, Inc

90085063

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9682 Fontainebleau Blvd

3. Mailing Address

Unlimited Mgmt.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O.Box 440067

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami FL

4. FEI Number

591629223

Applied For

Not Applicable

Zip

33172

Country

USA

Zip

33144

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Jose Lopez Silvero

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

9682 Fontainebleau Blvd

504

City

Miami

FL

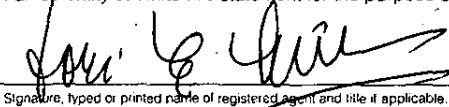
Zip Code

33172

**DO NOT WRITE
IN THIS SPACE**

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



Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

APRIL 3/03

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

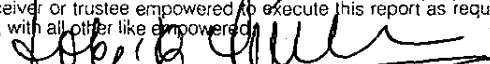
10. OFFICERS AND DIRECTORS

TITLE	P/D
NAME	Antonio Sanz
STREET ADDRESS	9682 Fontainebleau Blvd #104
CITY-ST-ZIP	Miami, FL 33172
TITLE	VP/D
NAME	Rene de la Parte
STREET ADDRESS	9682 Fontainebleau Blvd.#511
CITY-ST-ZIP	Miami, FL 33172
TITLE	S/D
NAME	Jose Lopez Silvero
STREET ADDRESS	9682 Fontainebleau Blvd. # 504
CITY-ST-ZIP	Miami, FL 33172
TITLE	T/D
NAME	Carmen Lopez-Bonet
STREET ADDRESS	9682 Fontainebleau blvd. # 404
CITY-ST-ZIP	Miami, FL 33172
TITLE	D
NAME	Alberto Correa
STREET ADDRESS	9682 Fontainebleau Blvd.#709
CITY-ST-ZIP	Miami, FL 33172

TITLE	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	

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IN THIS SPACE**

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



APR 14 2003