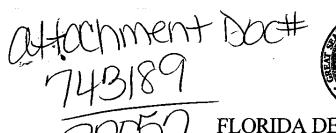
## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED RAME OF SIGNING OFFICER OR DIRECTOR

## Jul 31, 2001 8:00 am **DÖCUMENT # 743189 Secretary of State** 1. Entity Name HILLCREST-BY-THE-SEA ASSOCIATES, INC. 04-17-2001 90147 040 \*\*\*\*70.00 Principal Place of Business Mailing Address 9165 COLLINS AVENUE 9165 COLLINS AVENUE SURFSIDE FL 33154 SURFSIDE FL 33154 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1916818 Not Applicable Zip Country Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) A & T ACCOUNTING & TAX 7098 BONITA DRIVE MIAMI BEACH FL 33141 City Zip Coge Fl F 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 aignature required whenreinsteting) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State 6 FEE IS \$61.25 Added to Fees ₹ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition Change TITLE ☐ Delete TITLE MATOUK, BILL MAME NAME STREET ADDRESS 9165 COLLINS AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SURESIDE FL 33154 **VP** D Change ☐ Addition Delete TITLE TITLE PRIVREL, TON! NAME MALIF STREET ADDRESS 9165 COLLINS AVE STREET ADDRESS CITY ST-20 SURESIDE FL 33154 CITY-ST-ZIP ☐ Delete TITLE ☑ Change ☐ Addition SAMHAK, DAVID NAME NAME SAMHAK, DAVID STREET ADDRESS 9165 COLLINS AVE STREET ADDRESS 9165 COLLINS AVE SURFSIDE, FL 331 CITY-ST-ZIP SURESIDE FL 33154 CITY-ST-ZIP ☐ Change XI Addition TITLE Delete TITLE GONZALEZ, LISSETTE WAHL, LARRY NAME NAME STREET ADDRESS 9165 COLLINS AVE STREET ADORESS 9165 COLLINS AVE CITY-ST-ZIP CITY-ST-ZIP SURESIDE FL 33154 SURFSIDE, FL 33154 ☐ Change ☐ Addition TITLE ☐ Delete TITLE PEREDA, LUIS NAME NAME 9165 COLLINS AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SURESIDE FL 33154 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP DITY-ST-2P 12. I hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee. changed, or on an attachment with an a 305 SIGNATURE:

FILED



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

April 18, 2001

HILLCREST-BY-THE-SEA ASSOCIATES, INC. 9165 COLLINS AVENUE SURFSIDE, FL 33154

Subject: HILLCREST-BY-THE-SEA ASSOCIATES, INC.

Reference

743189

Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$70.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/RR ANNUAL REPORTS SECTION