

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2001 8:00 am
Secretary of State

0002841

DOCUMENT # 743949

03-16-2001 90012 027 ****61.25

1. Entity Name

THE GARDENS OF KENDALL CONDOMINIUM NO. 1, ASSOCI

Principal Place of Business

Mailing Address

10425 SW 112 AVENUE
 12079 S.W. 131ST AVENUE
 MIAMI FL 33176
 US

C/O D. BURT
 12079 S.W. 131ST AVENUE
 MIAMI FL 33186

00025874



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1843562

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

7. Name and Address of New Registered Agent

SKRLD INC
 201 ALHAMBRA CIRCLE
 SUITE 1102
 CORAL GABLES FL 33134

Name

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

City

FL

Zip Code

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

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **VD** Delete
 NAME: **MARIN, IVAN**
 STREET ADDRESS: **10425 SW 112 AVE 313**
 CITY-ST-ZIP: **MIAMI FL**

TITLE: **PD** Change Addition
 NAME: **Ehassane, Afif**
 STREET ADDRESS: **10425 SW 112 Ave., #326**
 CITY-ST-ZIP: **Miami, FL.**

TITLE: **TD** Delete
 NAME: **QUIROS, CELSA**
 STREET ADDRESS: **10425 SW 112TH AVE #213**
 CITY-ST-ZIP: **MIAMI FL**

TITLE: **D** Change Addition
 NAME: **Ortega, Luisa**
 STREET ADDRESS: **10425 SW 112 Ave., #226**
 CITY-ST-ZIP: **Miami, FL.**

TITLE: **SD** Delete Addition
 NAME: **ALTAMIRANO, FAUSTO G**
 STREET ADDRESS: **10425 SW 112 AVE 118**
 CITY-ST-ZIP: **MIAMI FL**

TITLE: **TD** Change Addition
 NAME: **Sostre, Jason**
 STREET ADDRESS: **10425 SW 112 Ave., #324**
 CITY-ST-ZIP: **Miami, FL.**

TITLE: Delete Change Addition
 NAME: **Quiros, Celsa**
 STREET ADDRESS: **10425 SW 112 Ave., #213**
 CITY-ST-ZIP: **Miami, FL. 33176**

TITLE: Change Addition
 NAME: **Quiros, Celsa**
 STREET ADDRESS: **10425 SW 112 Ave., #213**
 CITY-ST-ZIP: **Miami, FL. 33176**

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 STREET ADDRESS: **10425 SW 112 Ave., #213**
 CITY-ST-ZIP: **Miami, FL. 33176**

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.

CELSA QUIROS-YILA
 SIGNATURE: *Celsa Quiros Yila*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/27/01 305-596-5367
 Date Daytime Phone #

CR2E037 (10/00)