2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2000 8:00 am
Secretary of State
05-17-2000 90868 043 ****70.00

DOCUMENT # 744358

1. Entity Name

WEST LAKE VILLAGE II CONDOMINIUM ASSOCIATION, IN

Principal Place of Business	Mailing Address
470 #204 ~~410~~ WEST PARK DR ~~#205~~ MIAMI FL 33172	2500 N.W 97 Av # 2nd Floor Miami, FL 33162 ~~2151 LE JEUNE ROAD~~ ~~STE #305~~ ~~CORAL GABLES FL 33134-4200~~ US

DO NOT WRITE IN THIS SPACE

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 59-1930659 ☐ Applied For ☐ Not Applicable

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
~~GOHNUD, YABLIN PA~~ ~~699 S FEDERAL HWY~~ ~~HOLLYWOOD FL 33020~~	Name ARNOLD YABLIN, P.A. Street Address (P.O. Box Number Not Acceptable) 699 S. FEDERAL HIGHWAY City HOLLYWOOD FL Zip Code 33020

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 Arnold Yablin, P.A. ARNOLD YABLIN, P.A. 2-8-00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD VILORIO, LILLIAN 410 W PARK DR #102 MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President PP Lopez Ronald 470 west park Dr #204 miami, FL 33172	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MULLER, ROGELIO 410 W PARK DR #205 MIAMI FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President VP Badell Melba 480 west park Dr #207 MIAMI, FL 33172	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JORGE L. ROIE 440 WEST PARK DRIVE #101 MIAMI FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer T.O Garcia Jorge 460 W park Dr #108 MIAMI, FL 33172	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary SD Grillo Orlando 510 west park Dr #202 MIAMI, FL 33172	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Tielas Jose 450 west Park Dr # 107 miami, FL 33172	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: SIGNATURE REQUIRED President Ronald Lopez 04/27/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #