## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 10, 2002 8:00 am Secretary of State DOCUMENT # **746396** 03-10-2002 90784 001 \*\*\*\*\*5.00 1900 MERIDIAN CONDOMINIUM ASSOCIATION, INC. 03-10-2002 90784 002 \*\*\*\*61.25 Principal Place of Business Mailing Address 1900 MERIDIAN AVE 1900 MERIDIAN AVE CONDO MAIL APT 501 CONDO MAIL APT 501 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address 1900 Meridian Ave. 1900 Meridian Avenue DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suitë, Apt. #, etc.... Apt. 501 or Condo. box Condo. mail box, Apt501 City & State 4. FEI Number Applied For City & State Miami Beach, Dade Dade, Florida 59-2018313 Not Applicable Beach. \$8.75 Additional Zip Country' Country 5. Certificate of Status Desired П Fee Required U. S. A. 33739 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Manilo Astigiano Street Address (P.O. Box Number is Not Acceptable) 1900 Heridian Avenue GOMEZ, AIDA 1900 MERIDIAN AVE. MIAMI BEACH FL 33139 Zip Code 33139 Miami Beach, Fl. 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) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITE P Delete TITLE DP Horis Schnaider NAME NAME SCHNAIDER, BORIS 1900 Meridian Avenue Miami Beach, FE. 33139 STREET ADDRESS STREET ADDRESS 1900 MERIDIAN AVE. CITY-ST-ZIP CITY-ST-ZIP MIAML BCH FL 33139 Change ☐ Addition TITLE $D^{\circ}T$ ☐ Delete TITLE Mirta Granda NĂME NAME GRANADA, MIRTA 1900 Meridian Avenue STREET ADDRESS STREET ADDRESS 1900 MERIDIAN AVE -Miami Beach, FL. 33139 CITY-ST-ZIP CITY-ST-ZIP MIAMI BCH FL 33139 TITLE $\overline{\mathcal{DS}}$ ☐ Addition ☐ Change ☐ Delete TITLE Gonzalez Yolanda NAME NAME PEREZ, LUIS 1900 Meridiam Avenue STREET ADDRESS STREET ADDRESS 1900 MERIDIAN AVE. Miami Beach, FT.33139 CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139. ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

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** 

**FILED**