

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 746440

1. Entity Name

THE GEORGIAN CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 25, 2000 8:00 am**  
**Secretary of State**

03-25-2000 90009 001 \*\*\*\*61.25

Principal Place of Business

Mailing Address

1621 COLLINS AVE  
 MIAMI BEACH FL 33139

1621 COLLINS AVE  
 MIAMI BEACH FL 33139-3123

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2059160

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

DE LA CAMARA, ROSA  
 WATERFORD CENTER PARK, 5201 BLUE LAGOON DR  
 SUITE 100  
 MIAMI FL 33126

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 PD  Delete  
 NAME TORRES, CECILIA  
 STREET ADDRESS 1623 COLLINS AVE #518  
 CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE PD  Change  Addition  
 NAME Fernandez, Maria L.  
 STREET ADDRESS 1623 Collins Ave #1008  
 CITY-ST-ZIP Miami Beach, FL 33139

TITLE VD  Delete  
 NAME ARMESTO, ALFONSO  
 STREET ADDRESS 1623 COLLINS AVE #518  
 CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE VD  Change  Addition  
 NAME Leibowitz, Martin  
 STREET ADDRESS 1623 Collins Ave #701  
 CITY-ST-ZIP Miami Beach, FL 33139

TITLE SD  Delete  
 NAME GONZALEZ, ETNA  
 STREET ADDRESS 1623 COLLINS AVE  
 CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE SD  Change  Addition  
 NAME Espinosa, Maria  
 STREET ADDRESS 9684 SW 99 St  
 CITY-ST-ZIP Miami, FL 33176

TITLE TD  Delete  
 NAME LOPEZ, JOSE M  
 STREET ADDRESS 1621 COLLINS AVE #603  
 CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE TD  Change  Addition  
 NAME Nazar, Patricia  
 STREET ADDRESS 1623 Collins Ave #307  
 CITY-ST-ZIP Miami Beach, FL 33139

TITLE D  Delete  
 NAME MARRERO, RAMON  
 STREET ADDRESS 1623 COLLINS AVE #612  
 CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE SD  Delete  
 NAME COSTALES, GLADYS  
 STREET ADDRESS 1623 COLLINS AVE #714  
 CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: Maria L. Fernandez MARIA L. FERNANDEZ 3/17/00 (305) 919-5611  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #