FILED
Jun 19, 2003 8:00 am
Secretary of State
05-05-2003 90326 038 ****61.25

5/5/2

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752715 (L)

1. Entity Name
The Greens Condominium Assoc. ✓

DO NOT WRITE IN THIS SPACE

55048993

2. Principal Place of Business	3. Mailing Address
	275 Fontainbleau Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite #140
City & State	City & State Miami
Zip — Country	Zip 33172 Country FL

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2046935 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Excel Management

Street Address (P.O. Box Number is Not Acceptable)
275 Fontainbleau Blvd. #140

City Miami FL Zip Code 33172

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 Sylvia Pique, as agent for the Association Sylvia Pique 4/30/03 DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FEE IS $61.25 Initial or Amended UBR

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

TITLE P NAME STREET ADDRESS CITY-ST-ZIP	Pedro, Peraza 8841 West Flagler st #109 Miami, Fl. 33174
TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	Freddy Barrego 8821 West Flagler #312 Miami, Fl. 33174
TITLE T NAME STREET ADDRESS CITY-ST-ZIP	Griselda, Polanco 8841 West Flagler #309 Miami, Fl. 33174
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Barbara Amantel 8841 west flagler #405 Miami, Fl 33174
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Pedro, Fernandez 200 NW 87 ave #1207 Miami, Fl 33172
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Jose Martinez 8801 west flagler #207 Miami, Fl. 33174

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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Sylvia Pique for the Association 4/30/03 305-207-2343

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752715

1. Entity Name

the Greens Condominium Assoc

DO NOT WRITE IN THIS SPACE

55048993

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2. Principal Place of Business	3. Mailing Address
	275 Fontainbleau Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite #140
City & State	City & State Miami
Zip / Country	Zip 33172 / Country FL

4. FEI Number 59-2046935 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Excel Management Assoc.

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

275 Fontainbleau Blvd. #140

City Miami **FL** Zip Code 33172

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Sylvia Vazquez, as agent for the Association 6/16/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P NAME Pedro Penaza STREET ADDRESS 8841 West Flagler st. #109 CITY-ST-ZIP Miami, Fl. 33174		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE VP NAME Freddy Barreau STREET ADDRESS 8821 West Flagler st #212 CITY-ST-ZIP Miami, Fl. 33174		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE T NAME Griselda Polanco STREET ADDRESS 8841 West Flagler st #309 CITY-ST-ZIP Miami, Fl. 33174		TITLE NAME STREET ADDRESS CITY-ST-ZIP	**DO NOT WRITE IN THIS SPACE**
TITLE S NAME Pedro Fernandez STREET ADDRESS 200 NW 87 Ave #1207 CITY-ST-ZIP Miami, Fl. 33172		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE D NAME Alberto Bustillo STREET ADDRESS 8801 West Flagler #210 CITY-ST-ZIP Miami, Fl 33172		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE D NAME Jose' Martinez STREET ADDRESS 8801 West Flagler #207 CITY-ST-ZIP Miami, Fl. 33174		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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SIGNATURE: X Freddy Barreau 6/16/03 305-007-2343

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Freddy Barreau