

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90096 020 ****70.00

DOCUMENT # 753294

1. Entity Name

TROPICAL PARK VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**3819 S.W. 82ND AVE.
CLUBHOUSE
MIAMI FL 33155**

Mailing Address

**3819 S.W. 82ND AVE.
CLUBHOUSE
MIAMI FL 33155**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2265325**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VAZQUEZ, FROILAN
3824 SW 79 AVE #111
MIAMI FL 33155**

**ARELI ACEVEDO
3815 SW 82 Ave #37
Miami, FL 33155**

7. Name and Address of New Registered Agent

Name **ARELI ACEVEDO**

Street Address (P.O. Box Number is Not Acceptable) **3815 SW 82 Ave. #37**

City **MIAMI**

FL

Zip Code **33155**

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 **ARELI ACEVEDO**

Areli Acevedo

1/9/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **VAQUEZ, FROILAN**
STREET ADDRESS **3824 SW 79 AVE #111**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE **VPD** ☒ Delete
NAME **VAZQUEZ, FROILAN**
STREET ADDRESS **3824 SW 79 AVE #111**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE **SD** ☐ Delete
NAME **MARINO, IRMA**
STREET ADDRESS **38045 SW 79 AVE #75**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE **TD** ☐ Delete
NAME **BAUTE, LAZARO**
STREET ADDRESS **3828 SW 79 AVE #110**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE **VD** ☒ Delete
NAME **ACEVEDO, ARELI**
STREET ADDRESS **3815 SW 82 AVE # 37**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE **VSD** ☐ Delete
NAME **MARIA ROMERO**
STREET ADDRESS **3820 SW 79 Ave #93**
CITY-ST-ZIP **Miami, FL 33155**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
NAME **ARELI ACEVEDO**
STREET ADDRESS **3815 SW 82 Ave. # 37**
CITY-ST-ZIP **MIAMI, FL 33155**

TITLE **VPD** ☒ Change ☐ Addition
NAME **Jose Edgar Gonzalez**
STREET ADDRESS **3820 SW 79 Ave. #94**
CITY-ST-ZIP **MIAMI, FL 33155**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☒ Change ☐ Addition
NAME **GUSTAVO LARREA**
STREET ADDRESS **3800 SW 79 AVE #127**
CITY-ST-ZIP **MIAMI, FL 33155**

TITLE ☒ Change ☐ Addition
NAME **see President**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Maria Romero**
STREET ADDRESS **3820 SW 79 Ave #93**
CITY-ST-ZIP **Miami, FL 33155**

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 ARELI ACEVEDO**

1/9/07 (786) 388-1571

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

CR2E037 (10/02)