## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 02, 2001 8:00 am Secretary of State **DOCUMENT # 766621** 1. Entity Name 05-02-2001 90067 004 \*\*\*\*61.25 168 CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 168 SE 1ST STREET P.O. BOX 110223 7 3 3 0 0 0 #802 MIAMI FL 33111 MIAMI FL 33131 HS 2. Principal Place of Business 3. Mailing Address STREET 168 SE 1 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 803 City & State City & State 4. FEI Number Applied For 59-2425018 MIAMI Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HORNSTEIN, BRUCE 317 SEVENTY FIRST STREET SUITE 500 City Zip Code MIAMI BEACH FL 33131 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **FILE NOW:** Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Addition ☐ Delete TITLE TITLE JORDAN, CARLOS NAME NAME JORDAN, CARLOS 117 GAVILAN AVE STREET ADDRESS STREET ADDRESS 117 CAVILAN AVE CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES, FL 33143 CORAL GABLES FL 33143 Delete Change TITLE Addition Addition TITLE JACOB PEFFER SABINO, MARCELO NAME NAME 168 SE I ST 12TH FLOOR STREET ADDRESS STREET ADDRESS 1541 BRICKELL AVE #2905 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33129 33131 TITLE Delete Change TITLE Addition ABRAMS, LEONERD NAME TOPHONEL SAMONLY NAME STREET ADDRESS 168 SE 15T. 9TH FWOR STREET ADDRESS 1 NE 1ST STREET #700 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33132 .FL 33131 TITLE Delete TITLE ☐ Change ☐ Addition NAME VERITE, JORDI STREET ADDRESS STREET ADDRESS 168 SE 1 ST #300 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33131** TITLE Delete ☐ Addition LEONE, MARCELO NAME NAME STREET ADDRESS 168 SE 1ST STREET, 11TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 PRESIDENT, DIR. JEFF SHERMAN TITLE ☐ Delete TITLE Addition NAME NAME

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.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

168 SE 1 STREET #803

MIAMI FC