

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90018 049 ****61.25

825302

DO NOT WRITE IN THIS SPACE

DOCUMENT # N16383
 1. Entity Name
Vista Alegre Townhomes Condominium Association, Inc.

Principal Place of Business
5525 W 26 Court # 104
Hialeah, FL 33016

Mailing Address
UNLIMITED MANAGEMENT SERVICES INC.
P.O. BOX 440067
MIAMI, FL 33144-0067

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0275527	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Hugo Espinosa

7. Name and Address of New Registered Agent

Name Julio Gonzalez
Street Address (P.O. Box Number is Not Acceptable) 937A SW 87th Avenue
City Miami FL Zip Code 33174

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: *Julio Gonzalez* DATE: **03/06/00**

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

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
-------------------------------------	----------------------------------------------------------------------------------	------------------------------------	--------------------------------------------------

10. OFFICERS AND DIRECTORS	
TITLE P/D	<input type="checkbox"/> Delete
NAME Julio Gonzalez	
STREET ADDRESS 5525 W 26 Ct. # 104	
CITY-ST-ZIP Hialeah, FL 33016	
TITLE VP/D	<input type="checkbox"/> Delete
NAME Luisa Sabatier	
STREET ADDRESS 5530 W 26 Ct. # 105	
CITY-ST-ZIP Hialeah, FL 33016	
TITLE S/D	<input type="checkbox"/> Delete
NAME Mercy Leon	
STREET ADDRESS 5580 W 26 Ct. # 212	
CITY-ST-ZIP Hialeah, FL 33016	
TITLE T/D	<input type="checkbox"/> Delete
NAME Anthony Hernandez	
STREET ADDRESS 5530 W 26 Ct. # 102	
CITY-ST-ZIP Hialeah, FL 33016	
TITLE VP/D	<input type="checkbox"/> Delete
NAME Raul Perez	
STREET ADDRESS 5580 W 26 Court # 105	
CITY-ST-ZIP Hialeah, FL 33016	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Julio Gonzalez* DATE: **3/6/00** (305) 266 8084

CR2E037 (9/99)