

2002 UNIFORM BUSINESS REPORT (UBR)

0008996

DOCUMENT # N20896

1. Entity Name

PINECREST COMMERCIAL CENTER CONDOMINIUM ASSOCIATION, INC.

FILED

02 Aug -1 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

C/O CMV MANAGEMENT CO
10934 SW 146 PLACE
MIAMI FL 33186

C/O CMV MANAGEMENT CO
10934 SW 146 PLACE
MIAMI FL 33186

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

65-0024029

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C M V MANAGEMENT COMPANY
PINECREST COMMERCIAL CENTER
10934 SW 146 PLACE
MIAMI FL 33186

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

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 D ☐ Delete
NAME MARTINEZ, JULIO
STREET ADDRESS 12315 SW 132 CT
CITY-ST-ZIP MIAMI FL 33186

TITLE SECRETARY TREASURE ☒ Change ☐ Addition
NAME MARTINEZ, JULIO
STREET ADDRESS 12315 SW 132 CT
CITY-ST-ZIP MIAMI, FL 33186

TITLE T ☒ Delete
NAME HUTTON, GLENN
STREET ADDRESS 12309 SW 132 CT
CITY-ST-ZIP MIAMI FL

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

TITLE PD ☐ Delete
NAME GOLDSTEIN, LEE
STREET ADDRESS 12325 SW 132 CT
CITY-ST-ZIP MIAMI FL 33186

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V.P. ☐ Change ☒ Addition
NAME FOREMAN MARY
STREET ADDRESS 12303 SW 132 CT
CITY-ST-ZIP MIAMI FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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

LEE GOLDSTEIN, LEE

7-15-02 305-387-6267

CR2E037 (4/02)