2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other li

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED **DOCUMENT # N23777** Jun 05, 2000 8:00 am 1. Entity Name **Secretary of State** FIRST WEST LAKE CONDOMINIUM ASSOCIATION, INC. 06-05-2000 90022 044 ****61.25 Principal Place of Business Mailing Address P.O. BOX 8315 5352 W. 20TH COURT HIALEAH FL 33016-2023 HIALEAH FL 33015 2. Principal Place of Business 3. Mailing Address <u>/o Action General Serv. C</u>orp. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. P.O. BOX 110548 Applied For 4. FEI Number City & State City & State Hialeah, Fl. 33011-0548 65-0221221 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ALZA, LUIS P 5352 W. 20TH COURT HIALEAH FL 33016 City Zip Code Fl 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 5/24/2000 SIGNATURE ed agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. Change ☐ Addition TITLE **VPD** ☐ Delete TITLE NAME NAME MUNOZ; MAXIMO ALZA, LUIS P STREET ADDRESS STREET ADDRESS 5371 W. 20TH COURT 5352 W 20th Court CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33016 <u> HIALEAH, FL. 33016</u> Change ☐ Addition ☐ Delete TITLE TITLE PD SD NAME NAME ALZA, LUIS P MUNOZ, MAXIMO STREET ADDRESS STREET ADDRESS 5352 W. 20TH CT 5371 W 20th Court CITY-ST-ZIP CITY-ST-ZIP HIALEAH, FL. 33016 <u>HIALEAH FL 33016</u> Delete XI Change ☐ Addition TITLE TITLE GORDILLO, ENRIQUE 5391 W 20 CT NAME NAME BRICENO, XIOMARA STREET ADDRESS STREET ADDRESS 2048 W. 53RD PLACE CITY-ST-ZIP CITY-ST-ZIP HIALEAH, FL. 33016 HIALEAH FL 33016 D_{ij} , \mathbb{T}_{ij} . X Change ☐ Delete TITLE ☐ Addition TITLE NAME BENNETTE, MARIA ROSA CRAIG, LYNDA CHERYL NAME STREET ADDRESS STREET ADDRESS 5325 W 20th LN **5261 WEST 20 COURT** CITY-ST-ZIP CITY-ST-ZIP HIALEAH, FL. 33016 HIALEAH FL 33016 ☐ Change TITLE STD ☐ Delete TITLE ☐ Addition NAME NAME GORDILLO, ENRIQUE STREET ADDRESS STREET ADDRESS 5391 W. 20TH COURT CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33016 TITLE □ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

5/24/2000

Date

(305) 823-1201

Daytime Phone #