

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91617 007 ****61.25

DOCUMENT # N23777

1. Entity Name

FIRST WEST LAKE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 8315
HIALEAH FL 33015

C/O ACTION GENERAL SERV CORP
4445 WEST 16TH AVENUE. #308
HIALEAH FL 33012

400044

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

65-0221221

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALZA, LUIS P
5352 W. 20TH COURT
HIALEAH FL 33016

Name

~~FUENTES, BERTY~~

Street Address (P.O. Box Number is Not Acceptable)

5351 W 20th CT

City

HIALEAH

FL

Zip Code
33016

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

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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	SD MUNOZ, MAXIMO	☐ Delete
STREET ADDRESS	5352 WEST 20TH COURT	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE NAME	P ALZA, LUIS P	☐ Delete
STREET ADDRESS	5352 WEST 20TH COURT	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE NAME	TD GORDILLO, ENRIQUE	☐ Delete
STREET ADDRESS	5391 WEST 20TH COURT	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE NAME	D CRAIG, LINDA	☒ Delete
STREET ADDRESS	5325 W 20TH LANE	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME	P FUENTES, BERTY	☒ Change ☐ Addition
STREET ADDRESS	5351 W 60th Ct	
CITY-ST-ZIP	HIALEAH, FL. 33016	
TITLE NAME	S. BENNETT, MARIA ROSA	☒ Change ☐ Addition
STREET ADDRESS	5361 W 20th Ct	
CITY-ST-ZIP	HIALEAH, FL. 33016	
TITLE NAME	T GUERRERO, JOSE R.	☒ Change ☐ Addition
STREET ADDRESS	5399 W 20th CT	
CITY-ST-ZIP	HIALEAH, FL. 33016	
TITLE NAME	D MUNOZ, MAXIMO	☒ Change ☐ Addition
STREET ADDRESS	5371 W 20th CT	
CITY-ST-ZIP	HIALEAH, FL. 33016	
TITLE NAME	D ALZA, LUIS P.	☒ Change ☐ Addition
STREET ADDRESS	14305 S.W 164 Terr.	
CITY-ST-ZIP	MIAMI, FL. 33177	
TITLE NAME	D GORDILLO, ENRIQUE	☒ Change ☐ Addition
STREET ADDRESS	5391 W 20th CT	
CITY-ST-ZIP	Hialeah, FL. 33016	

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

B Fuentes

5/9/02

305/823-1201

CR2E037 (9/01)