

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2000 8:00 am
Secretary of State

05-22-2000 90023 021 ****61.25

DOCUMENT # **N30434**

1. Entity Name

PRESIDENTIAL CORNERS CONDOMINIUM ASSOCIATION, IN

Principal Place of Business

Mailing Address

199 SOUTHWEST 12TH AVENUE
MIAMI FL 33130-8056

199 SOUTHWEST 12TH AVENUE
MIAMI FL 33130-1044

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0114982

Applied For

Not Applicable

Zip

Country

Zip

Country

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

RAMOS-FERRER, CESAR
199 S.W. 12TH AVE.
MIAMI FL 33130

Name **JOSE DOCE**

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

**199 SW 12 AVE
APT 418**

City **MIAMI**

FL Zip Code **33130**

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

Jose Ferrer

Jose Doce

4/14/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEF 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	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
SD	RAMOS, CESAR	199 SW 12TH AVE #513	MIAMI FL	<input checked="" type="checkbox"/>
VSTD	SOTO, MARIA	199 S.W. 12TH AVE., #511	MIAMI FL	<input type="checkbox"/>
D	SOBALVARRO, MARIA	199 S.W. 12TH AVE., COMMERCIAL UNIT	MIAMI FL	<input checked="" type="checkbox"/>
P	MARINE, ROLANDO	199 SW 12 AVE #315	MIAMI FL 33130	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PRESIDENT	JOSE DOCE	199 SW 12 AVE 418	MIAMI FL 33130	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VOCAL	MARIA SOTO	199 SW 12 AVE #511	MIAMI FL 33130	<input type="checkbox"/>	<input type="checkbox"/>
	ALEX RINQUEIRA VP.	199 SW 12 AVE 301	MIAMI FL	<input type="checkbox"/>	<input type="checkbox"/>
	SECRETARY THORNTON	PEDRO P. SOTO	199 SW 12 AVE #505	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

Jose Ferrer PRESIDENT

4/17/00

305-326-9455

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #