

2000 UNIFORM BUSINESS REPORT (UBR)

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

04-22-2000 90044 046 ****61.25

DOCUMENT # N94000004901

1. Entity Name

LINCOLN TOWERS CONDOMINIUM ASSOCIATION, INC.

C0068755



DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
1300 LINCOLN RD MIAMI BEACH FL 33139 US		1300 LINCOLN RD OFFICE BLDG MIAMI BEACH FL 33139-2264 US	
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	65-0580583	Applied For	<input type="checkbox"/>
		Not Applicable	<input type="checkbox"/>
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DIAZ, YDALBERTO 1300 LINCOLN RD #704 MIAMI BEACH FL 33139		Name: <u>Ricardo Pontillo</u> Street Address (P.O. Box Number is Not Acceptable): <u>1300 Lincoln Rd # 701</u> City: <u>M. Beach</u> FL Zip Code: <u>33139</u>	

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] DATE: 7/19/00

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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PD NAME: PONTILLO, RICARDO STREET ADDRESS: 1300 LINCOLN ROAD #701 CITY-ST-ZIP: MIAMI BEACH FL 33139	<input type="checkbox"/> Delete	TITLE: Treasurer NAME: MARIANA LEMUS STREET ADDRESS: 1300 Lincoln Rd # 401 CITY-ST-ZIP: M. Beach, FL 33139	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: MIRANDA, JORGE STREET ADDRESS: 1300 LINCOLN ROAD #604 CITY-ST-ZIP: MIAMI BEACH FL 33139	<input type="checkbox"/> Delete	TITLE: Secretary NAME: Ingo Osterkamp + Houret STREET ADDRESS: 1300 Lincoln Rd # 1006 CITY-ST-ZIP: M. Beach FL 33139	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: DIAZ, YDALBERTO STREET ADDRESS: 11 ISLAND AVE #1510 CITY-ST-ZIP: MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowerments.

SIGNATURE: [Signature] [Signature] [Signature] (305) 532-1933

CFR2E037 (9/99)