## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N95000001313

Country

1. Entity Name

Principal Place of Business

4970 SW 72ND AVE ...

33155

## LAKE POINTE CONDOMINIUM ASSOCIATION OF MARINA LA KE, INC.



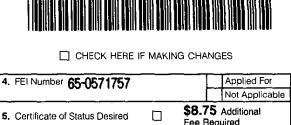
Mailing Address c/o Maddux & Co 4970 SW-72ND AVE 7250 SW 39 Terr STE-105 MIami, F133153 **MIAMI-FL 33155** 

STE 105 **MIAMI FL 33155** 118-US 2. Principal Place of Business 3. Mailing Address 7250 SW 39TERRACE 4970 SW 72 Ave Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State MIAMI, FL MIAMI,

33155

FILED Jul 28, 2003 8:00 am **Secretary of State** 

07-28-2003 90152 031 \*\*\*\*61.25



7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JOHN SCOTT WESTON GIBELLINI, AUDREY Street Address (P.O. Box Number is Not Acceptable) 7250 SW 39 TERRACE 5970 SW 72ND AVE, #105 **MIAMI FL 33155** City MIAMI

Country

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

FILE NOW: FEE IS \$61.25 After September 10, 2003, min will be \$236.25 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Pavable to Florida Department of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PTD TITLE **XX**Change ☐ Addition TITLE Delete NAME GIBELLINI, AUDREY NAME ABBASS, KHONSANY STREET ADDRESS 4970 SW 72ND AVE, #105 STREET ADDRESS 4970 SW 72 Ave Suite 100 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL MIAMI, FL 33155 Addition TITLE ☐ Delete TITLE BECZKOWSKI, SYDNEY NAME NAME QUEVEDO, RAFAEL STREET ADDRESS 4970 SW 72ND AVE, #102 STREET ADDRESS 4970 SW 72 Ave Suite 109 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL MIAMI, FL 33155 TITLE Delete TITLE XX Change Addition KHONSARY, ABBASS NAME -NAME BECZKOWSKI, SYDNEY STREET ADDRESS 4970 SW 72ND AVE, #100 STREET ADDRESS 4970 SW 72 Ave Suite 102 CITY-ST-ZIP MIAMI FL CITY-ST-ZIP MIAMI, FL 33155 Delete TITLE Change Addition TITLE COMPAGNONI, LOU NAME NAME GIBELLINI, DANIELA STREET ADDRESS 4970 SW 72ND AVE, #106 STREET ADDRESS 4970 SW 72 Ave Suite 103 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL MIAMI, FL <u>33155</u> TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITI E ☐ Delete TITLE ☐ Change ☐ Addition NAME 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

KHONSAUY-PREST