

2001 UNIFORM BUSINESS REPORT (UBR)

3/2.

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-02-2001 90062 001 ****61.25

DOCUMENT # N96000004859

1. Entity Name

FASHION SQUARE OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1870 S BAYSHORE DRIVE
 COCONUT GROVE FL 33133-5309
 US

1870 S BAYSHORE DRIVE
 COCONUT GROVE FL 33133-5309
 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

65-0704623

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

ROTHSTEIN, LAWRENCE I
1870 S BAYSHORE DRIVE
COCONUT GROVE FL 33133

Name

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

City

FL

Zip Code

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 restateing)

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 Delete
 NAME **PD WIENER, MAURICE**
 STREET ADDRESS **1870 S BAYSHORE DR.**
 CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **STD ROTHSTEIN, LAWRENCE I**
 STREET ADDRESS **1870 S BAYSHORE DR**
 CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VD WIENER, RICHARD N**
 STREET ADDRESS **950 THIRD AVENUE**
 CITY-ST-ZIP **NEW YORK NY 10022**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **VP D CARLOS CAMAROTA**
 STREET ADDRESS **1870 S. BAYSHORE DR., Coconut Grove, FL 33133**
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 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:

Carlos Camarota **CARLOS CAMAROTA**

2/23/01

305-854-6808

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)