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

FILED
May 12, 2003 8:00 am
Secretary of State
05-12-2003 90227 023 ****61.25

DOCUMENT # N970000003509

1. Entity Name

05-12-2003 90227 023 ****61.2

	PRESIDENTIAL ESTATE HOMEOWNER ASSOCIA						
	DO NOT WRITE	IN THIS	SPAC	E			
Principal Place of Business 3. Mailing Address							
CONTINENTAL GROUP, LTD — 2950 N. 28 TH TERRACE HOLLYWOOD, FL. 33020 USA —		CONTINENTAL GROUP, LTD 2950 N. 28 TH TERRACE HOLLYWOOD, FL. 33020 USA —		DO NOT WRITE IN THIS SPACE 4. FEI Number (5.0002402 Applied For			
					65-0883403 H		Not Applicable
Zip	Country	Zip	Coun	itry	5. Certificate of Status Desired		
				Name	7Name and Addre	ss of Current Registered A	gent
DO NOT WRITE IN THIS SPACE					YMAN & KAPLAN OURTHOUSE TOWER		
					50 W. FLAGLER S MAMI, FL. 33130	TE. 2704	
IN THIS SPACE				N	MR. GARY MARS		\ada_
		· .		City			:ode
8. The above	e named entity submits this statement/o			d office or registe			-03
· · · · · · · · · · · · · · · · · · ·	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Hegistered	Agent signature require	ed when reinstating)	DATE	
	FEE IS \$61.25 Initial or Amended UBR	1	Campaign Fin d Contribution	· -	\$5.00 May Be Added to Fees	Make Check F Department	- ,
10.	OFFICERS AND DIF	ECTORS		* 10			
title Name	PRESIDENT TARA SOLOMIANY		TITLE NAME		•	•	
STREET ADDRESS	1637 PRESIDENTIAL WAY N. MIAMI BEACH, FL. 33179			ADDRESS			
CITY-ST-ZIP	<u> </u>		CITY-S	T-ZIP	**		
TITLE NAME	VICE - PRESIDENT STEVEN FISKE		TITLE NAME				
STREET ADDRESS CITY-ST-ZIP	1631 PRESIDENTIAL WAY N. MIAMI BEACH, FL. 33179		STREET CITY-S	ADDRESS T-ZIP			
TITLE	TREASURER		TITLE				
NAME STREET ADDRESS	JAIME MUROW 19432 DIPLOMAT DRIVE		NAME	ADDRESS	*		
CITY-ST-ZIP	N. MIAMI BEACH, FL. 33179		CITY-S		DO	NOT WRIT	E
TITLE	SECRETARY	_	TITLE NAME		IN T	HIS SPACE	E
NAME STREET ADDRESS	GIL BONWITT 19410 AMBASSADOR CT.			ADDRESS			_
CITY-ST-ZIP	N. MIAMI BEACH, FL. 33179		° city-s	T-ZÍP	ter g al g e	y the second	
TITLE Name	DIRECTOR CLIVE METZ		TITLE				j
STREET ADDRESS	19470 AMBASSADOR CT.		STREET	ADDRESS			
CITY-ST-ZIP	N. MIAMI BEACH, FL. 33179		CITY-S	T-ZIP			
TITLE NAME	DIRECTOR MICHAEL BAUMAN		TITLE NAME.				1
STREET ADDRESS CITY-ST-ZIP	1472 PRESIDENTIAL WAY N. MIAMI BEACH, FL. 33179		>	ADDRESS T-ZIP			
GILLEGI-ZIE 1							

12. Thereby centify 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND RIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

SOLOMIANY

4-30-0<u>3</u>

Daytime Phone #