

**2000 UNIFORM BUSINESS REPORT (UBR)**

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**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

04-29-2000 90017 041 \*\*\*\*61.25

**DOCUMENT # N99000000942**

1. Entity Name  
**ROYAL POINCIANA INDUSTRIAL PARK CONDOMINIUM NO. 2**

Principal Place of Business                      Mailing Address

**11030 N. KENDALL DRIVE  
 SUITE 1110  
 CORAL GABLES FL 33134**                      **11030 N. KENDALL DRIVE  
 SUITE 1110  
 CORAL GABLES FL 33134**

2. Principal Place of Business                      3. Mailing Address

Suite, Apt. #, etc.                      Suite, Apt. #, etc.

City & State                      City & State

Zip                      Country                      Zip                      Country



DO NOT WRITE IN THIS SPACE

4. FEI Number                      Applied For

**65-0921970**                       Not Applicable

5. Certificate of Status Desired                       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**VENTON, WILLIAM  
 11030 N. KENDALL DRIVE  
 SUITE 1110  
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name **JESUS R. GONZALEZ**  
 Street Address (P.O. Box Number is Not Acceptable) **11936 SW 8TH STREET**  
 City **MIAMI** FL Zip Code **33184**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
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.  **\$5.00** May Be Added to Fees                      **Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	AVILA, RIGOBERTO	
STREET ADDRESS	11030 N. KENDALL DRIVE SUITE 100	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	VENTO, WILLIAM	
STREET ADDRESS	11030 N. KENDALL DRIVE SUITE 100	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	AVILA, YESENIA	
STREET ADDRESS	11030 N. KENDALL DRIVE SUITE 100	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATRICIO RUIZ	
STREET ADDRESS	8574 NW 61 STREET	
CITY-ST-ZIP	MIAMI, FL. 33166	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOSE R. FREITAS	
STREET ADDRESS	8554 N.W. 61 STREET	
CITY-ST-ZIP	MIAMI, FL. 33166	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KEEMANUEK MARTINEZ	
STREET ADDRESS	8570 NW 61 STREET	
CITY-ST-ZIP	MIAMI, FL. 33166	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: **SIGNATURE REQUIRED**                      Date                      Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)