

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000005021

FILED
Sep 12, 2002
Secretary of State

Entity Name: POTOMAC PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7376 SW 152 AVENUE
MIAMI, FL 33193

New Principal Place of Business:

7388 SW 152 AVENUE
MIAMI, FL 33193

Current Mailing Address:

7154-B SW 47 STREET
MIAMI, FL 33155

New Mailing Address:

FEI Number: 65-0998586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CADICORP MANAGEMENT GROUP
7154-B SW 47 STREET
MIAMI, FL 33155

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LABRADA, MALVIS E
Address: 7380 SW 152 AVE
City-St-Zip: MIAMI, FL 33193

Title: TVPD () Delete
Name: LOPEZ, JAMEDA
Address: 7376 SW 152 AVE
City-St-Zip: MIAMI, FL 33193

Title: SD () Delete
Name: FERNANDEZ, DAISY
Address: 7392 SW 152 AVE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CUAREZMA, ROBERTA
Address: 7388 SW 152 AVE
City-St-Zip: MIAMI, FL 33193

Title: SD (X) Change () Addition
Name: RECINOS, MARCOS
Address: 7354 SW 152 AVE
City-St-Zip: MIAMI, FL 33193

Title: TD (X) Change () Addition
Name: LOZANO, RUBEM
Address: 7366 SW 152 AVE
City-St-Zip: MIAMI, FL 33193

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTA CUAREZMA

PD

09/12/2002

Electronic Signature of Signing Officer or Director

_____ Date