


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 19, 2003 8:00 am**  
**Secretary of State**

03-19-2003 90131 001 \*\*\*150.00

**DOCUMENT # P99000048133**

1. Entity Name  
**GABLES CATALONIA, INC.**



Principal Place of Business  
**283 CATALONIA AVE., 2ND FLOOR  
CORAL GABLES FL 33134**

Mailing Address  
**283 CATALONIA AVE., 2ND FLOOR  
CORAL GABLES FL 33134**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **65-0923487**

Applied For  
 Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MIMAI CORPORATE SYSTEMS, INC.  
283 CATALONIA AVE., 2ND FLOOR  
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<b>D</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RASCO, RAMON E</b>	NAME	
STREET ADDRESS	<b>283 CATALONIA AVE., 2ND FLOOR</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>CORAL GABLES FL 33134</b>	CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REININGER, STEVEN R</b>	NAME	
STREET ADDRESS	<b>283 CATALONIA AVE., 2ND FLOOR</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>CORAL GABLES FL 33134</b>	CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PEREZ, LUIS A</b>	NAME	
STREET ADDRESS	<b>283 CATALONIA AVE., 2ND FLOOR</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>CORAL GABLES FL 33134</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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 information empowered.

**SIGNATURE:** *[Signature]* **Director** **3/12/03** **305-476-9100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/02)

Attachment

70030500  
P99000048133

**RASCO REININGER PEREZ & ESQUENAZI, P.L.**  
ATTORNEYS & COUNSELORS AT LAW

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(305) 476-7100

José Manuel Palli  
Of counsel

\*Board Certified-Business Litigation

March 17, 2003

**CERTIFIED MAIL**

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Re: **GABLES CATALONIA, INC.**

Dear Sir or Madam:

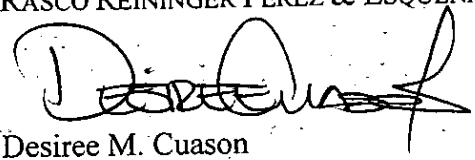
Enclosed please find the 2003 Annual Report for the above-referenced corporation. Also enclosed is check no. 1579 in the amount of One Hundred Fifty and No/100 Dollars (\$150.00) representing your filing fee.

Kindly file the above-mentioned report.

Thank you for your attention to this matter.

Very truly yours,

RASCO REININGER PEREZ & ESQUENAZI, P.L.



Desiree M. Cuason  
For the Firm

DMC/ctp  
Enclosures  
628.0009\342933.doc