

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720318

1. Entity Name

PORT ROYALE CONDOMINIUM, INC.

**FILED**  
**Mar 15, 2000 8:00 am**  
**Secretary of State**

03-15-2000 90108 007 \*\*\*\*61.25

Principal Place of Business

6969 COLLINS AVENUE  
M  
MIAMI BEACH FL 33141  
US

Mailing Address

6969 COLLINS AVENUE  
M  
MIAMI BEACH FL 33141-3201  
US

2. Principal Place of Business

3. Mailing Address

6969 Collins Ave.

6969 Collins Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

M  
City & State

M  
City & State

Miami Beach Fl.

Miami Beach Fl.

Zip Country

Zip Country

33141 Dade

33141 Dade

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PALACIOS, SANTIAGO  
6969 COLLINS AVE  
MIAMI BEACH FL 33141

Name  
Santiago F. Palacios

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

6969 Collins Ave.

City

FL

Zip Code  
33141

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 reinstating)

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 P  
NAME PALACIOS, SANTIAGO F  
STREET ADDRESS 6969 COLLINS AVE.  
CITY-ST-ZIP MIAMI BEACH FL 33141 ☐ Delete

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V  
NAME CHAO, HECTOR  
STREET ADDRESS 6969 COLLINS AVE.  
CITY-ST-ZIP MIAMI BEACH FL 33141 ☐ Delete

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T  
NAME RODRIGUEZ, FELIX  
STREET ADDRESS 6969 COLLINS AVE.  
CITY-ST-ZIP MIAMI BEACH FL 33141 ☐ Delete

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S  
NAME KADIN, SOL  
STREET ADDRESS 6969 COLLINS AVE  
CITY-ST-ZIP MIAMI BEACH FL 33141 ☒ Delete

TITLE S ☐ Change ☒ Addition  
NAME Lilliam Janata  
STREET ADDRESS 6969 Collins Ave.  
CITY-ST-ZIP Miami Beach Fl. 33141

TITLE D  
NAME CABANAS, EDUARDO  
STREET ADDRESS 6969 COLLINS AVENUE  
CITY-ST-ZIP MIAMI BEACH FL 33141 ☐ Delete

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME MEDINA, DANIEL  
STREET ADDRESS 6969 COLLINS AVE.  
CITY-ST-ZIP MIAMI BCH. FL 33141 ☐ Delete

TITLE D ☐ Change ☒ Addition  
NAME Rodriguez Armando  
STREET ADDRESS 6969 Collins Ave.  
CITY-ST-ZIP Miami Beach Fl. 33141

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  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/2000  
Date

Daytime Phone #

CR2E037 (9/99)