FILED

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Jan 30, 2002 8:00 am **DOCUMENT #716223 Secretary of State** 1. Entity Name 01-30-2002 90072 030 \*\*\*\*61.25 FOUR PARTNERS CONDOMINIUM, INC. Principal Place of Business Mailing Address 601 85TH ST. 601 85TH ST. MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0043651 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FERMIN, COTERA 601 - 85 ST APT #1 City Zip Code MIAMI BEACH FL 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE D ☐ Delete TITLE ☐ Addition NAME COTERA, FERMIN NAME STREET ADDRESS STREET ADDRESS 601 85 ST #1 CITY-ST-ZIP MIAMI BEACH FL 33141 CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE CORO, ANTONIO NAME STREET ADDRESS STREET ADDRESS 601 85 ST APT2 CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL ☐ Delete ☐ Addition FERMIN, RAMON COTERA NAME NAME STREET ADDRESS 601 - 85 ST, APT # 4 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33141 TITLE ☐ Delete TITLE ☐ Change ☐ Addition COTERA, SILA NAME NAME STREET ADDRESS 601 85 ST APT 3 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33141 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ 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 instee 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

1-17-2002- 305-867-0971