

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 717860

1. Entity Name

BAYSHORE PLACE CONDOMINIUM, INC.

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90175 012 ****61.25

Principal Place of Business

Mailing Address

1420 BRICKELL BAY DR
MIAMI FL 33131
US

C/O MIAMI MANAGEMENT
14275 SW 142 AVENUE
MIAMI FL 33186
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1475007

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MIAMI MANAGEMENT
14275 SW 142 AVENUE
MIAMI FL 33186

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.

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 LOPEZ-GARZON, ZALO
STREET ADDRESS 1420 BRICKELL BAY DRIVE #102
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

TITLE S
NAME Max Silver
STREET ADDRESS 1420 Brickell Bay Dr #1107
CITY-ST-ZIP Miami FL 33131 ☐ Change ☒ Addition

TITLE D
NAME LAMBERT, WALTER
STREET ADDRESS 1420 BRICKELL BAY DR. #608
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

TITLE TO
NAME Larry Freeman
STREET ADDRESS 1420 Brickell Bay Dr. #1106
CITY-ST-ZIP Miami FL 33131 ☐ Change ☒ Addition

TITLE S
NAME PRIETO, SUSANA
STREET ADDRESS 1420 BRICKELL BAY DRIVE #1102
CITY-ST-ZIP MIAMI FL 33131 ☒ Delete

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

TITLE DVP
NAME FLORES, MIRTHA
STREET ADDRESS 1420 BRICKELL BAY DRIVE
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

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

TITLE D
NAME HECHBERS, VERA
STREET ADDRESS 1420 BRICKELL BAY DRIVE
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

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

TITLE TD
NAME GARCIA, TERESA
STREET ADDRESS 1420 BRICKELL BAY DR
CITY-ST-ZIP MIAMI FL 33131 ☒ Delete

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

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

01/18/2002

305-373-5987

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)