

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 24, 2002 8:00 am**  
**Secretary of State**

03-24-2002 90060 023 \*\*\*\*61.25

**DOCUMENT # 707577**

1. Entity Name

**JEFFERSON PARK, INC., A CONDOMINIUM**

Principal Place of Business

**1498 JEFFERSON AVE  
 MIAMI BCH FL 33139  
 US**

Mailing Address

**C/O GALIANA MANAGEMENT  
 P O BOX 453436  
 MIAMI FL 33139  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1104478**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GALIANA MANAGEMENT  
 C/O MIRIAM GALIANA  
 250 SW 21 RD  
 MIAMI FL 33129**

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.

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

TITLE **DD** ☒ Delete  
 NAME **KELLEY, JAMES**  
 STREET ADDRESS **1498 JEFFERSON AVE, 505-A**  
 CITY-ST-ZIP **HIALEAH FL 33139**

TITLE **TS** ☐ Delete  
 NAME **SANTANA, MARIA**  
 STREET ADDRESS **1498 JEFFERSON AVENUE #408**  
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **DD** ☒ Delete  
 NAME **KOON, PAULA**  
 STREET ADDRESS **1498 JEFFERSON AVE., #206**  
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **VP** ☐ Delete  
 NAME **BORSKY, JAY**  
 STREET ADDRESS **1498 JEFFERSON AVE APT 508-A**  
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **D** ☐ Delete  
 NAME **CHELALA, MARIA E**  
 STREET ADDRESS **1498 JEFFERSON AVE APT 208**  
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **DS** ☒ Delete  
 NAME **MARTINEZ, ALFREDO**  
 STREET ADDRESS **1498 JEFFERSON AVENUE #301**  
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition  
 NAME **Leonard Gelman**  
 STREET ADDRESS **1498 Jefferson Ave #103**  
 CITY-ST-ZIP **Miami Beach FL 33139**

TITLE **D** ☐ Change ☒ Addition  
 NAME **Ali Glassman**  
 STREET ADDRESS **1498 Jefferson Ave # 407**  
 CITY-ST-ZIP **Miami Beach FL 33139**

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

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

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

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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 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:

**MARIA D. SANTANA**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)