2002 Uniform Business Report (UBR)

SIGNATURE:

2002 Uniform Business Report (UBR)							FILED May 28, 2002 8:00 am				
DOCU 1. Entity Nam 215 BUIL					Secreta 04-11-2002 9						
Principal Place of Business C/O EDUARDO BOTTE 10295 COLLINS AVE #1027 BAL HARBOUR FL 33154 Mailing Address C/O EDUARDO BOTTE 10295 COLLINS AVE #1027 BAL HARBOUR FL 33154				7							
2. Principal Place of Business 3. Mailing Address							t (Aftrest til Solet (18): Solet beet nat	61 14 913 \$6 11 9 1 9 311	***** ***** **** ****		
Suite, Apt. #, etc. Suite, Apt. #, etc.				<u> • • </u>			DO NOT WRITE IN THIS SPACE				
City & Stat		City & State				4. FEI Number 65 - 1152727 Applied For Not Applicable					
Zip	Country	Zip	Cour	ntry		5. C	ertificate of Status Desired	\$8.75 Fee Rec	Additional uired		
	6. Name and Address of Current Re	gistered Agent		Name		7. N	ame and Address of New Regist	ered Agent			
FELDMAN, DAVID ESQ				Street Address (P.O. Box Number Is Not Acceptable)							
407 LINCOLN ROAD SUITE 701											
MIAMI BEACH FL 33139			- . •				and the state of t				
-				City FL Zip Code ered office or registered agent, or both, in the State of Florida.					Code		
SIGNATURE Signature, typed or printed name of registered agent and talle if applicable. (NOTE: R Property				will be \$5	00 50.00		10. Election Campaign Financin Trust Fund Contribution.	· — •	5.00 May Be Ided to Fees	•	
11. OFFICERS AND DIRECTORS							DITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 11	_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS BOTTE, EDUARDO F 10295 COLLINS AVENUE #1027 BAL HARBOUR FL 33154	☐ Delete	111					Chan		CR2E034 (9/01)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV : PALEMO, MIGUEL ANGEL 10295 COLLINS AVENUE \$1027 BAL HARBOUR FL 33154	☐ Delete	- 11					Chan	ge 🔲 Addition	5	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT SEISDEDOS, ENRIQUE 10295 COLLINS AVENUE \$1027 BAL HARBOUR FL 33154	☐ Delete	11				المراجعة	Chan	ge Addition	* *	
TITLE NAME STREET ADDRESS	DV SUNOL, SEBASTIAN LUIS -10295-COLLINS.AVENUE.#1027-	⊠ Delete		E Et address_				☐ Chan	ge Addition	<i>1</i> 5	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BAL HARBOUR FL 33154	☐ Delete	NAM STRE			. =	د حدست	☐ Chan	ge Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deleta	TITLI NAM STRE					☐ Chan	ge		
13. I hereby o	certify that the information supplied with this on this report or supplemental report is true portation or the receiver or trustee empower or on an attachment with an address, with	s filing does not qualify for e and accurate and that med to execute this eport a all other like persowered.	the exe	motion state	ed in Sec ive the s oter 607,	tion 11 ame le Florida	19.07(3)(i), Florida Statutes. I furth gal effect as if made under oath; the a Statutes; and that my name appli	er certify that that the art I am an officers in Block 1	ne information cer or director 1 or Block 12 If		