

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90081 041 ****61.25

DOCUMENT # 707576

1. Entity Name

520 - 79TH STREET INC A CONDOMINIUM



Principal Place of Business

**520-79TH STREET. #8
MIAMI BEACH FL 33141**

Mailing Address

**520-79TH STREET. #8
MIAMI BEACH FL 33141**

70003757

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 **NOT APPLICABLE**

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**REGUENA, HELENA
520 79TH STREET
APT. 1
MIAMI BEACH FL 33141**

7. Name and Address of New Registered Agent

Name **Ramón Soto**

Street Address (P.O. Box Number is Not Acceptable)
520-79th Street, #8

City **Miami Beach**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Ramón Soto - Treasurer/Director**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Jan. 7 2003

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	SERRANO, FAUSTINO	520-79TH STREET, #2	MIAMI BEACH FL 33141	<input type="checkbox"/>	<input type="checkbox"/>
TD	SOTO, RAMON	520-79TH STREET, #8	MIAMI BEACH FL 33141	<input type="checkbox"/>	<input type="checkbox"/>
SD	RIVEST, GERARD	520 79TH STREET #3	MIAMI BEACH FL 33141	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: **Ramón Soto**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/03 (305)865-6165

CR2E037 (10/02)