

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91211 008 ***150.00

DOCUMENT # 199295

1. Entity Name

SEA TOWER APARTMENTS, INC.



DO NOT WRITE IN THIS SPACE

11005139

2. Principal Place of Business

2840 North Ocean Blvd.
Suite, Apt. #, etc.

3. Mailing Address

2840 N. Ocean Blvd.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale FL 33308

City & State

Ft. Lauderdale FL 33308

4. FEI Number

59-0830092

Applied For

Not Applicable

Zip

33308

Country

Zip

33308

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Robert Rojas

Street Address (P.O. Box Number is Not Acceptable)

2840 N. Ocean Blvd.

Ft. Lauderdale FL

City

FL

Zip Code

33308

**DO NOT WRITE
IN THIS SPACE**

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

Robert R. Rojas, President

4-16-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Robert Rojas
2840 N. Ocean Blvd 1102
Ft. Lauderdale FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
James Martin
2840 N. Ocean Blvd #405
Ft. Lauderdale FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
Yves Bellec
2840 N. Ocean Blvd 608
Ft. Lauderdale FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
Anna Peddle
2840 Ocean Blvd 909
Ft. Lauderdale FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
John Arnold
2840 N. Ocean Blvd # 908
Ft. Lauderdale FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Klee, Eckart
2840 N. Ocean Blvd 908
Ft. Lauderdale FL 33308

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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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert R. Rojas, President 4-16-03 954-566-2632

Date

Daytime Phone #

CR2E034B (12/02)