## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 341842** Feb 07, 2000 8:00 am Secretary of State CONTINENTAL HOMES OF FLORIDA, INC. 02-07-2000 90002 016 \*\*\*158.75 Principal Place of Business Mailing Address 8000 GOVERNOR'S SQUARE BLVD 8000 GOVERNOR'S SQUARE BLVD SUITE 101 SUITE 101 MIAMI LAKES FL 33016-6204 MIAMI LAKES FL 33016 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1237314 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required --- -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Juan Rodriquez CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) C/O CT CORPORATION SYSTEM <u> 2550 World Trade Center-80 SW 8 Street</u> 1200 SOUTH PINE ISLAND RD. **Suite 2550** PLANTATION FL 33324 Zip Code 33130 Miami 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 FILE NOW!!! FEE IS \$150.00 9. This opporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition XXDelete TITLE TIT! F NAME BERGUGO, AUGUSTO L NAME STREET ADDRESS STREET ADDRESS 8000 GOVER SQUARE BLVD STE 101 CITY-ST-ZIP CITY-ST-7IP MIAMI LAKES FL 33016 Change X X elete ☐ Addition TITLE TITLE MORONEY, JOHN P. NAME NAME STREET ADDRESS STREET ADDRESS 8000 GOVERNOR'S SQUARE BLVD CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL 33016 Change Addition TITLE **XX**Delete TITI F VPC NAME JORDAN, GREG NAME Rafael J. Roca STREET ADDRESS STREET ADDRESS 8000 GOVER SQUARE BLVD STE 101 8000 Governor's Square Blvd., CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL 33016 Miami Lakes, FL -33016 ☐ Addition ☐ Delete TITLE NAME SHARPSTEEN, CANDACE NAME Candace Sharpsteen 8000 Governor's Square Blvd., STREET ADDRESS STREET ADDRESS 9450 SUNSET DR., STE-101 CITY-ST-7IP CITY-ST-ZIP **MIAMI FL 33173** <u> Miami LAkes. FL 33016</u> ☐ Delete TITLE Change **XX**Addition TITLE NAME NAME Paul Romanowski STREET ADDRESS STREET ADDRESS 8000 Governor's Square Blvd., CITY-ST-ZIP CITY-ST-ZIP Miami Lakes, FL 33016 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Romanowski Romanowski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

1/19/00

(305)512-4954

FILED