

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**May 02, 2001 8:00 am**  
**Secretary of State**

05-02-2001 90038 026 \*\*\*150.00

**DOCUMENT # 526856**

1. Entity Name  
**A.R.E.A., INC.**

Principal Place of Business  
**9400 SOUTH DADELAND BOULEVARD, PH 1  
MIAMI FL 33156**

Mailing Address  
**9400 SOUTH DADELAND BOULEVARD, PH 1  
MIAMI FL 33156**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1730067**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CANNON, MICHAEL Y  
9400 SOUTH DADELAND BLVD., PH-1  
MIAMI FL**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PTD  
CANNON, MICHAEL Y.  
3251 COACOOCHIE ST.  
COCONUT GROVE FL**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**33143**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**V  
KATZ, JAY B.  
9400 S DADELAND BLVD., PH-1  
MIAMI, FL 33156**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**V  
VALERA, JOSE E.  
9400 S DADELAND BLVD., PH-1  
MIAMI, FL 33156**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**V  
STONE, MARYJANE  
9400 S DADELAND BLVD., PH-1  
MIAMI, FL 33156**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**S/T/D  
WIENER, WILLIAM  
9400 S DADELAND BLVD., PH-1  
MIAMI, FL 33156**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**V/D  
CANNON, ANNETTE EPELBAUM  
9400 S DADELAND BLVD., PH-1  
MIAMI, FL 33156**

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.

**SIGNATURE.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01

(305) 670-0001

Date

Daytime Phone #

**MICHAEL Y. CANNON**

CR2E034 (10/00)

Attachment

AREEA, INC.  
FEI NUMBER 59-1730067

DOCUMENT #526856  
SECTION 11

ADDITIONAL OFFICERS AND DIRECTORS

835525

D  
LIBRIZZI, CINDY B.  
9400 S DADELAND BLVD, PH-1  
MIAMI, FL 33156