2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 683926

1. Entity Name

CODINA REALTY SERVICES, INC.

FILED
May 02, 2001 8:00 am
Secretary of State
05-02-2001 90165 040 ***150.00

Principal Plac	ce of Business		Mailing Address			1					
TWO ALHAMBRA PLAZA. PH2 CORAL GABLES FL 33134			TWO ALHAMBRA PLAZA, PH2 CORAL GABLES FL 33134					0004	586	1	
2. Principal Place of Business			3. Mailing Address								
SSS AIRI	ambia Circle, S	uite 900	Sui335 Ain arritira Circle, Suite 900			DO NOT WRITE IN THIS SPACE					
Coral Gables, Florida 33134 City & State			Coral Gables, Florida 33134 City & State			JS 204 1003				opplied For	7
Zip Country			Zip Country			5. Certificate of Status Desired S8.75 Additional Fee Required					1
<u>.</u> .	6 Name an	d Address of Current Re	egistered Agent			7. Name and Address of New Registered Agent					4
	o. Name an	Address of Current Ne	gistered Agent		ame		ame and Address of New Regis	tered Ag	ent		-
BEFELER, HENRY TWO ALHAMBRA PLAZA, PH2					Street Address (P.O. Box Number is Not Acceptable)						
	RAL GABLES FI				355 Alhambra Circle, Suite 900 Coral Gables, Florida 33134						1
				Ċi	ty	•		FL	Zip Cod	le]
Tax filing requirement and elects to do so. After M.				(NOTE: Registered Agent signature required NOW!!! FEE IS \$150.00 AY 1, 2001 Fee will be \$550.00 k Payable to Department of Sta			nstating) 10. Election Campaign Financi Trust Fund Contribution.	DATE		O May Be	
11.		OFFICERS AND DI	<u>(</u>	12.			DITIONS/CHANGES TO OFFICER	S AND DI	RECTOR	S IN 11	┨.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CODINA, ARM TWO ALHAMI CORAL GABL	AANDO Bra Plaza Ph-2	☐ Delete	TITLE NAME STREET ADD	1 00	5 Alhar	mbra Circle, Suite 900 bles. Florida 33134		Change	Addition	(10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GIBSON, FORD O TWO ALHAMBRA PLAZA PH-2 CORAL GABLES FL		□ Delete	TITLE NAME STREET ADD CITY-ST-ZI	PRESS	355 Alhambra Circle, Suite 900 Coral Gables, Florida 33134		Þ	Change	Addition	3000
NAME STREET ADDRESS CITY-ST-ZIP	VTS BEFELER, HENRY TWO ALHAMBRA PALZA PH-2 CORAL GABLES FL		- TITLE NAME STREET ADD CITY-ST-ZI	RESS 355 A Coral	Alhambra Circle, Suite 900 al Gables, Florida 33134				Addition	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEISEN, JOH TWO ALHAME MIAMI FL 331	Bra Plaza, Ph II	□ Delete	. TITLE NAME STREET ADD CITY-ST-ZI			ambra Circle, Suite 900 ables, Florida 33134	7	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V AS COBB, KOLLEEN TWO ALHAMBRA PLAZA, PH II MIAMI FL 33134		TITLE NAME STREET ADD CITY-ST-ZI	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	355 Alhambra Circle, Suite 900 Coral Gables, Florida 33134		7	Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		armatica augustical with the	☐ Delete	TITLE NAME STREET ADD CITY-ST-ZII] Change	Addition	

I nereby 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:

Kolleen of Cobb