

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 703262

1. Entity Name

625 ESPANOLA WAY INC A CONDOMINIUM

FILED
Aug 03, 2000 8:00 am
Secretary of State

08-03-2000 90040 011 ****61.25

Principal Place of Business

641 ESPANOLA WAY, #37
ATTN: GEORGE JEREZ
MIAMI BEACH FL 33139
US

Mailing Address

641 ESPANOLA WAY, #37
ATTN: GEORGE JEREZ
MIAMI BEACH FL 33139
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

641 ESPANOLA WAY
Suite, Apt. #, etc.

3. Mailing Address

641 ESPANOLA WAY
Suite, Apt. #, etc.

City & State
MIAMI BEACH FL

Zip
33139

Country
USA

City & State
MIAMI BEACH FL

Zip
33139

Country
USA

4. FEI Number
59-1038865

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

JEREZ, GEORGE
641 ESPANOLA WAY
APT 37
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name
STEVE LEVIN
Street Address (P.O. Box Number is Not Acceptable)
641 ESPANOLA WAY # 1516
City
MIAMI BEACH FL Zip Code
33139

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 STEVE LEVIN 7-28-00
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JEREZ, GEORGE	
STREET ADDRESS	641 ESPANOLA WAY, #37	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE	D	<input type="checkbox"/> Delete
NAME	CERNUDA, JUAN	
STREET ADDRESS	641 ESPANOLA WAY, #1	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MARTIN, CLAIRE	
STREET ADDRESS	641 ESPANOLA WAY, #24	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE	D	<input type="checkbox"/> Delete
NAME	ORMAS, ANGEL	
STREET ADDRESS	641 ESPANOLA WAY, #8	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEVE LEVIN	
STREET ADDRESS	641 ESPANOLA WAY # 1516	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RUSS BORNKLAU	
STREET ADDRESS	641 ESPANOLA WAY #23	
CITY-ST-ZIP	MIAMI BEACH, FL 33139	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEAN HANCK	
STREET ADDRESS	641 ESPANOLA WAY	
CITY-ST-ZIP	MIAMI BEACH, FL 33139	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	A. SOLOMON	
STREET ADDRESS	641 ESPANOLA WAY	
CITY-ST-ZIP	MIAMI BEACH, FL 33139	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: STEVE LEVIN 7-28-00 3055349300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/00)