NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91525 008 ****61.25

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DOCUMENT # 717849

1. Entity Name
CRESTVIEW TOWERS CONDOMINIUM ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2025 NE 164th Street	2025 NE 164th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: North Miami Beach, Florida	City & State: North Miami Beach, Florida
Zip: 33162 Country: U.S.A.	Zip: 33162 Country: U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1357386 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Howard A. Kusnick, P.A.

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

300 Northwest 82nd Avenue, Suite #505

City: Ft. Lauderdale FL Zip Code: 33324

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: Howard A. Kusnick 4/11/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P/D
NAME	Calo, Vivian
STREET ADDRESS	2025 NE 164th Street
CITY-ST-ZIP	North Miami Beach, Florida 33162
TITLE	V/D
NAME	Cruz, Sarafin
STREET ADDRESS	2025 NE 164th Street
CITY-ST-ZIP	North Miami Beach, Florida 33162
TITLE	T/D
NAME	Perez, Rosa
STREET ADDRESS	2025 NE 164th Street
CITY-ST-ZIP	North Miami Beach, Florida 33162
TITLE	S/D
NAME	Gomez Jr., Pedro
STREET ADDRESS	2025 NE 164th Street
CITY-ST-ZIP	North Miami Beach, Florida 33162
TITLE	D
NAME	OCampo, Doris
STREET ADDRESS	2025 NE 164th Street
CITY-ST-ZIP	North Miami Beach, Florida 33162
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CR2E037B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: V Calo 4/11/03 305-945-8004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #