

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

09-05-2003 90115037 *****61.50

717849

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717849

1. Entity Name

Crestview Towers Condominium Association, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2025 NE 164th Street

3. Mailing Address
2025 NE 164th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
North Miami Beach, Florida

City & State
North Miami Beach, Florida

4. FEI Number 59-1357386

Applied For
Not Applicable

Zip
33162

Country
USA

Zip
33162

Country
USA

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 Kusnick, P.A. Howard J.

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

300 NW 82nd Avenue, Suite #505

City Fort 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

Signature, typed or printed name of registered agent is not applicable.

(NOTE: Registered Agent signature required when re-registering)

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
NAME
P - Henry Boza
STREET ADDRESS
2025 NE 164th Street
CITY- ST- ZIP
North Miami Beach, FL 33162

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
V - Pedro Gomez
STREET ADDRESS
2025 NE 164th Street
CITY- ST- ZIP
North Miami Beach, FL 33162

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
S - Johana Linares
STREET ADDRESS
2025 NE 164th Street
CITY- ST- ZIP
North Miami Beach, FL 33162

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
T - Carmen Perez
STREET ADDRESS
2025 NE 164th Street
CITY- ST- ZIP
North Miami Beach, FL 33162

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
D - Juan Carlos Collazo
STREET ADDRESS
2025 NE 164th Street
CITY- ST- ZIP
North Miami Beach, FL 33162

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
D - Serafin Cruz & D - Vivian Calo
STREET ADDRESS
2025 NE 164th Street
CITY- ST- ZIP
North Miami Beach, FL 33162

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this report 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 life empowered.

SIGNATURE:

Henry Boza, President

08/21/2003 (305) 945-8004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/02)