2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 722162 Mar 08, 2000 8:00 am 1. Entity Name **Secretary of State** 755 BUILDING CONDOMINIUM, INC. 03-08-2000 90066 005 ****61.25 Principal Place of Business Mailing Address 755 SW 6TH STREET 755 SW 6TH STREET MIAMI FL 33130-2679 MIAMI FL 33130 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 65-0050182 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CARASUSAN, ELSA 755 S.W. 6TH ST City Zip Code MIAMI FL 33130 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: Trust Fund Contribution. **Department of State FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Ana Lola coelho NAME NAME TERZIAN, MARIO 755 S.W. 6 ST, #15 STREET ADDRESS STREET ADDRESS 755 SW 6 ST. #6 CITY-ST-7/P CITY-ST-ZIP Miani, FC 33130 MIAMI, FL 00000 ☐ Addition Change TITLE D Delete TITLE NAME FIJON, LYDIA NAME STREET ADDRESS STREET ADDRESS 755 S.W. 6 ST. #16 CITY-ST-ZIP CITY-ST-ZIP-MIAMI: FL"00000 ☐ Addition TITLE D ☐ Delete TITLE ☐ Change NAME LOPEZ, DULCE NAME STREET ADDRESS STREET ADDRESS 755 SW 6TH ST #3 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME **BLANCO, GLORIA** STREET ADDRESS STREET ADDRESS 755 S.W. 6TH ST. #9 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Delete TITLE Change TITLE NAME CARASUSAN, ELSA. NAME STREET ADDRESS STREET ADDRESS 755 S.W. 6TH ST. #11 CITY-ST-ZIP CITY-ST-7(P MIAMI FL ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

IATURE: SIGNATURE AND THE DESCRIPTION NAME OF SIGNING OFFICER OF DIRECTOR Date Date Dayling Phone /