

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90368 001 ****61.25

DOCUMENT # 723635



1. Entity Name
MAR RONDA CONDOMINIUM, INC.

Principal Place of Business Mailing Address
55 EAST 11 STREET, #33 **55 EAST 11 STREET, #33**
HIALEAH FL 33010 **HIALEAH FL 33010**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2370495		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
SILVA, MARIO 55 EAST 11 STREET, # 27 HIALEAH FL 33010				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				FL		Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IGNACIO, GENDAN		NAME	MANUEL SANCHEZ	
STREET ADDRESS	45 EAST 11ST ST #17		STREET ADDRESS	55 EAST 11ST. STREET, # 22	
CITY-ST-ZIP	HIALEAH FL 33010		CITY-ST-ZIP	HIALEAH, FLORIDA 33010	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SANCHEZ, MANUEL		NAME	ERICK A. CALDERA	
STREET ADDRESS	55 EAST 11TH STREET #22		STREET ADDRESS	55 EAST 11ST. STREET, # 18	
CITY-ST-ZIP	HIALEAH FL 33010		CITY-ST-ZIP	HIALEAH, FLORIDA 33010	
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVA, MARIO		NAME		
STREET ADDRESS	55 EAST 11ST STREET #27		STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33010		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: MARIO SILVA PRESIDENT FEB. 23/2003 (305) 882-8816

CP2E037 (10/02)