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

DOCUMENT # 725479

1. Entity Name

BEACH CLUB VILLAS CONDOMINIUM II INC



FILED Mar 20, 2003 8:00 am Secretary of State 03-20-2003 90147 040 ****61.25

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Principal Place of Business 3937 NE 167TH STREET N MIAMI BCH FL 33160			Mailing Address 3937 NE 167TH STREET N MIAMI BCH FL 33160				1 (88)() (88)(83)	8 1 8 1718 818 21 1 9 01 0 1818 81831 1	lidis didis didis did	DIA BIONE NOON	
2. Principal Place of Business 3. M				Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State				ity & State	-	4. FEI Number 59-		-1691773	691773 Applied For Not Applicate		
Zip Country			Zi	Zip Co		intry				5 Additional	
	6. Name	and Address of Current F	Register	ed Agent	-		7. Name and Add	ess of New Registere	<u> </u>		
GRAY, KENNETH 3857 NE 167 ST NORTH MIAMI BEACH FL 33160						Name Street Address (P.O. Box Number is Not Acceptable)					
						City	 	F	L Zip Cod	le	
the obliga	ations of regist	y submits this statement for ered agent. or printed name of registered agent ar				Agent signature requi		DATE			
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees				
10.		OFFICERS AND DIRI	ECTORS		11.		ADDITIONS/CHANGE	S TO OFFICERS AND I	DIRECTORS IN	1 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N. MIAMI BEACH FL 33160 PD GRAY, KENNETH			☐ Delete 1		T ADDRESS ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			مثانسينيد-			T ADDRESSS *** ST-ZIP	A. C. S. Daniel Contraction of the Contraction of t	The second desired after a	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BEN-ASSAYAG, ARIE 3845 NE 167TH ST. NORTH MIAMI BEACH FL 33160					T ADDRESS ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERA, JO 3833 NE 16 NORTH MIA			□ Delete	TITLE NAME STREE CITY-1	T ADDRESS ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete	TITLE NAME STREET	T ADDRESS ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		information supplied with the		☐ Delete	CITY-S				☐ Change	Addition	

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:

BUSINES REQUERERY HERTS TREASURER