

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

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90122 047 ****61.25

DOCUMENT # 725576

1. Entity Name
Flagler Plaza Condominium Association, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3001 SW 2nd St.

3. Mailing Address
3001 SW 2nd St.

Suite, Apt. #, etc.
Apt. # 113 C

Suite, Apt. #, etc.
Apt. # 113 C

City & State
Miami FL

City & State
Miami, FL

Zip Country
33135

Zip Country
33135

4. FEI Number
59-1651473

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Vicente Bogin

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

160 SW 30 Avenue Apt # 203-A

City Miami FL Zip Code 33135

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.

SIGNATURE *Vicente Bogin* Vicente Bogin April 8, 2002
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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Borges Zoe 3001 SW 2 St. Apt #105-C Miami, FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Sariol Elena 160 SW 30 Avenue Apt 201-A Miami FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Torres Maria T 3001 SW 2 St. Apt #102-C Miami FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Amador Josefa M 3001 SW 2 St. Apt #214-C Miami FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Bogin Vicente 160 SW 30 Avenue Apt # 203-A Miami FL 33135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Agenas Esperanza 3001 SW 2 St. Miami FL 33135

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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: *Vicente Bogin* Vicente Bogin April 8, 2002 305-642-2977
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/01)