2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State
02-26-2001 90534 013 ****61.25

DOCUMENT # 726238

1. Entity Name

CARIBBEAN HOUSE CONDOMINIUM, INC

Principal Place of Business	Mailing Address
3665 N.E. 167TH STREET NORTH MIAMI BEACH FL 33160	C/O BONISKE & FENAUGHTY, CPA ~~1320 S. DIXIE HWY., SUITE 715~~ ~~CORAL GABLES FL 33146~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	20191 NE 16 PL Suite, Apt. #, etc.
City & State	City & State: MIAMI FLORIDA
Zip / Country	Zip: 33179-2721 / Country: USA

4. FEI Number: 23-7441299 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MEJIA, CLARA 3665 NE 167 ST #409 NORTH MIAMI BEACH FL 33160	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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P AMADOR, JOAQUIN 3665 NE 167 ST #408 NORTH MIAMI BEACH FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V-D ANTONIO ALVAREZ 3665 NE 167 St # 404 NORTH MIAMI BEACH FL 33160	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V AMMIRATI, FRANK 3665 NE 167 STE #506 N. MIAMI BEACH FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P-D AMADOR, JOAQUIN 3665 NE 167 ST #408 NORTH MIAMI BEACH FL 33160	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST MEJIA, CLARA 3665 NE 167 ST #409 N. MIAMI BCH FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S.T-D CLARA MEJIA 3665 NE 167 ST #409 NORTH MIAMI BEACH FL 33160	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TC VARGAS, JUAN 3666 NE 167TH ST N MIAMI BEACH FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TC AMMIRATTI, MAGDALENA 3666 NE 167TH ST N MIAMI BEACH FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM ACOSTA, ROBERTO 3666 NE 167TH ST N MIAMI BEACH FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED CLARA MEJIA 2-19-01 (305) 983-3820
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Secretary/Treasurer Daytime Phone #