

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90032 003 ****61.25

DOCUMENT # 727318

1. Entity Name

THE CONQUEROR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**3948 N.E. 169TH STREET
NORTH MIAMI BEACH FL 33160
US****3948 N.E. 169TH STREET
NORTH MIAMI BEACH FL 33160
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1882599

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

**WEINTRAUB, AMOS
3600 N.E. 167TH STREET
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 \$61.259. 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	PD SOTOLONGO, MARIO 3948 N.E. 169 STREET #405 NORTH MIAMI BEACH FL 33160	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TRIA, COSMO 3948 N.E. 169 STREET #401 NORTH MIAMI BEACH FL 33160	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEVY, YAIR 21120 JUB CT #K14 AVENTURA FL 33180	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEYVA, GEORGE 3948 N.E. 169 STREET, #201 NORTH MIAMI BEACH FL 33160	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PACE, RICHARD 3948 N.E. 169 STREET #306 NORTH MIAMI BEACH FL 33160	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Kircher, Robert 3948 N.E. 169 Street, # 200 North Miami Beach, FL 33160	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Halac, Rudolf 3948 N.E. 169 Street, # 400 North Miami Beach, FL 33160	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Pace, Richard 3948 N.E. 169 Street, # 306 North Miami Beach, FL 33160	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sotolongo, Mario 3948 N.E. 169 Street, # 405 North Miami Beach, FL 33160	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Kircher 4/13/02 (305) 940-5137

Date

Daytime Phone #

CR2E037 (9/01)