

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

**FILED**  
**Apr 10, 2003 8:00 am**  
**Secretary of State**

04-10-2003 90095 038 \*\*\*\*70.00

**DOCUMENT # 729424**

1. Entity Name

**VERSAILLES GARDENS I CONDOMINIUM ASSOCIATION, IN C.**



Principal Place of Business

**9421 SOUTHWEST 4TH STREET  
MIAMI FL 33174**

Mailing Address

**9421 SOUTHWEST 4TH STREET  
MIAMI FL 33174**

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 **59-1594854**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**MELONI, EDOARDO ESQ  
FEIN & MELOAI LAW OFFICE  
900 SW 40TH AVENUE  
PLANTATION FL 33317**

7. Name and Address of New Registered Agent

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

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete  
NAME **ALIAGA, CARLOS**  
STREET ADDRESS **9441 S.W. 4TH STREET, #105**  
CITY-ST-ZIP **MIAMI FL**

TITLE **T** ☐ Change ☒ Addition  
NAME **GONZALO CARBALLO**  
STREET ADDRESS **9431 SW 4 ST**  
CITY-ST-ZIP **MIAMI, FL 33174**

TITLE **S** ☒ Delete  
NAME **PINO, PURA**  
STREET ADDRESS **9441 S.W. 4TH STREET, #409**  
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ Change ☒ Addition  
NAME **NATALIE Robledo**  
STREET ADDRESS **9441 SW 4 ST #409**  
CITY-ST-ZIP **MIAMI, FL 33174**

TITLE **D** ☐ Delete  
NAME **NORBERTO, GONZALEZ**  
STREET ADDRESS **9411 SW 4 ST #207**  
CITY-ST-ZIP **MIAMI FL 33174**

TITLE **D** ☐ Change ☒ Addition  
NAME **OLGA Roig**  
STREET ADDRESS **9441 SW 4 ST #103**  
CITY-ST-ZIP **MIAMI, FL 33174**

TITLE **D** ☐ Delete  
NAME **TUYA, ANTONIO**  
STREET ADDRESS **9411 S.W. 4TH STREET, #212**  
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S** ☐ Delete  
NAME **AMPARO, RUIZ**  
STREET ADDRESS **9441 SW 4 ST #106**  
CITY-ST-ZIP **MIAMI FL 33174**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **GOMEZ, FERNANDO**  
STREET ADDRESS **9431 SW 4 ST #411**  
CITY-ST-ZIP **MIAMI FL 33174**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

*SIGNATURE OF CARLOS ALIAGA/PRESIDENT*

*4/5/03 (20) JS3-4240*

CR2E037 (10/02)