

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

DOCUMENT # 729946

1. Entity Name

THE 100 DOUGLAS OFFICE CONDOMINIUM  
ASSOCIATION, INC.



FILED

03 JUN 24 PM 2:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

4535 Ponce de Leon Blvd.

Suite, Apt. #, etc.

3. Mailing Address

4535 Ponce de Leon Blvd.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Coral Gables, FL

City & State

Coral Gables, FL

4. FEI Number

59-1572448

Applied For

Not Applicable

Zip

33141

Country

US

Zip

33141

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Steven P. Lee

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

1699 Coral Way,

Suite 502

City

Miami,

FL

Zip Code

33145

**DO NOT WRITE  
IN THIS SPACE**

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

*Steven P. Lee*  
Signature, typed or printed name of registered agent and title if applicable

STEVEN P. LEE

(NOTE: Registered Agent signature required when reinstating)

DATE

900021110129

5-1-2003

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  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
D, P, S  
Hernandez, Harvey  
STREET ADDRESS  
CITY-ST-ZIP  
4535 Ponce de Leon Blvd.  
Coral Gables, FL 33141

TITLE  
NAME  
D, VP,  
Hernandez, Vanessa  
STREET ADDRESS  
CITY-ST-ZIP  
4535 Ponce de Leon Blvd.  
Coral Gables, FL 33141

TITLE  
NAME  
D  
DeMarco, Elena  
STREET ADDRESS  
CITY-ST-ZIP  
100 NW 37th Ave. #500  
Miami, FL 33125

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARVEY HERNANDEZ 5-1-2003

Date

Daytime Phone #

CR2E037B (12/02)



CORPORATION SERVICE COMPANY™

*Page 2 of 2*

ACCOUNT NO. : 072100000032

REFERENCE : 143577 .118429A

AUTHORIZATION :

*Patricia Pizzuto*

COST LIMIT : \$ 61.25

ORDER DATE : June 23, 2003

ORDER TIME : 11:17 AM

ORDER NO. : 143577-005

CUSTOMER NO: 118429A

CUSTOMER: Steven P. Lee, Esq  
Steven P. Lee, Esq  
Suite 502  
1699 Coral Way  
Miami, FL 33145

RECEIVED  
03 JUN 24 PM 1:07  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: THE 100 DOUGLAS OFFICE  
CONDOMINIUM ASSOCIATION, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea-EXT#1114

EXAMINER'S INITIALS: \_\_\_\_\_