

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

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90412 009 ****61.25

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1. Entity Name

PALMETTO PLACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**C/O YOYA LAND CORP.
7750-7776 NW 71ST
MIAMI FL 33176**

Mailing Address

**C/O YOYA LAND CORP.
704 SW 17 AVE... STE. 1
MIAMI FL 33135**

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 **59-1725040**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CASTRO, HENRY D SR.
10400 SW 97 CT.
MIAMI FL**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
P	CASTRO, HENRY D SR.	10400 SW 97 CT.	MIAMI FL 33176-2850	
VP	HERNANDEZ, PAUL	7754 NW 71 ST	MIAMI FL 33168	
S	DE FREITAS, FILIPE DE	7050 NW 77 CT.	MIAMI FL 33166	
D	ALLEN, RICHARD	7074 NW 77 CT.	MIAMI FL 33166	
D	BARRIOS, BERT	7772 N.W. 77TH CT	MIAMI FL 33166	
D	KAWAS, NICK	7058 N.W. 77TH CT.	MIAMI FL 33166	

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)