## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachmen

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNATURE:

## Apr 10, 2001 8:00 am Secretary of State **DOCUMENT # 734849** 1. Entity Name 04-10-2001 90012 047 \*\*\*\*61.25 WEST\*FLAGLER HERITAGE NUMBER TWO CONDOMINIUM. IN Principal Place of Business Mailing Address 131 SW 109 AVE 400 SW 107 AVE STE L-9 STE #312 A0044604 MIAMI FL 33174 MIAMI FL 33174 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1775204 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SIERRA, MARIA 131 SW 109 AVE STE L-9 City Zip Code MIAMI FL 33174 8. The above named entity subtracts this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida SIGNATURE X (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD Delete TITLE ☐ Change ☐ Addition TITLE NAME SIERRA, MARIA NAME STREET ADDRESS 131 S.W. 109TH AVENUE, #L-9 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 TITLE SD ☐ Delete TITLE ☐ Change ☐ Addition NAME MUNOZ, MIGUEL E NAME STREET ADDRESS 131 SW 109 AVE, STE L-4 STREET ADDRESS CITY-ST-ZIP \* CITY-ST-ZIP: TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HERNANDEZ, IRENE NAME STREET ADDRESS STREET ADDRESS 120 S.W. 108TH AVENUE, #I-4 CITY-ST-ZIP CITY-ST-ZIP Miami Fl TITLE □ Delete TITLE ☐ Change ☐ Addition NAME OTERO, GEORGINA STREET ADDRESS STREET ADDRESS 130 SW 108TH AVE, J-11 CITY-ST-ZIP CITY-ST-ZIP <u>miami fl</u> TITLE Delete TITLE ☐ Change ☐ Addition NAME PENEDO, ARMANDO NAME STREET ADDRESS 13220 SW 38TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33175 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with his 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 pay 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