2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 735709

1. Entity Name

VERSAILLES GARDENS II CONDOMINIUM ASSOCIATION, I

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90124 049 ****61.25

Principal Place of Business	Mailing Address
9430 W FLAGLER ST MIAMI FL 33174	9430 W FLAGLER ST MIAMI FL 33174-2011

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE — 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
AGUERO, ELSA L. 9430 W. FLAGLER STREET MIAMI FL 33174	Name: MIGUEL A. SUAU Street Address (P.O. Box Number is Not Acceptable): 9430 West Flagler Street City: Miami-Dade FL Zip Code: 33174

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] Jan 7/2000

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 Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ☑ Delete	TITLE	PRESIDENT ☐ Change ☑ Addition
NAME	AUUERO, ELSA L	NAME	MIGUEL A. SUAU
STREET ADDRESS	9430 W. FLAGLER STREET	STREET ADDRESS	9430 W. Flagler St.
CITY-ST-ZIP	MIAMI FL 33174	CITY-ST-ZIP	Miami, Fl. 33174
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MOUSEL, SUSANA	NAME	
STREET ADDRESS	9430 W. FLAGLER STREET	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33174	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HERNANDEZ, SARA L	NAME	
STREET ADDRESS	9430 W FLAGLER ST	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33174	CITY-ST-ZIP	
TITLE	D ☑ Delete	TITLE	TREASURER ☐ Change ☑ Addition
NAME	ORTEGA, EMILIO	NAME	JOSEFINA O. VASSEUR
STREET ADDRESS	9430 W FLAGLER ST	STREET ADDRESS	9430 W.Flagler St
CITY-ST-ZIP	MIAMI FL 33174	CITY-ST-ZIP	Miami, Fl. 33174
TITLE	D ☑ Delete	TITLE	VICE-SECRETARY ☐ Change ☑ Addition
NAME	BALLINA, RAUL	NAME	BERTA BUIGAS
STREET ADDRESS	9430 W FLAGLER ST	STREET ADDRESS	9430 W. Flagler St
CITY-ST-ZIP	MIAMI FL 33174	CITY-ST-ZIP	Miami, Fl. 33174
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	PEDROSO, ANA M	NAME	
STREET ADDRESS	9430 W. FLAGLER STREET	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	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] SIGNATURE REQUIRED 01/07/00 305-221-7960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

01/07/00 | 00 JAN 19 PM 12:00