

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90043 028 ****61.25

DOCUMENT # 737405

1. Entity Name

GEMINI IV TOWNHOUSE ASSOCIATION, INC.

f

Principal Place of Business

Mailing Address

3205 BIRD AVE
MIAMI FL 33133
US

3205 BIRD AVE
MIAMI FL 33133
US

2. Principal Place of Business

3205 Bird Ave

3. Mailing Address

3205 BIRD AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI

City & State

MIAMI

Zip

33133

Country

US

Zip

33133

Country

US

4. FEI Number

59-1781852

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HART, FRED
3205 BIRD AVE
MIAMI FL 33133

7. Name and Address of New Registered Agent

Name: Amber Kapua
Street Address (P.O. Box Number is Not Acceptable): 3205 Bird Ave
City: MIAMI FL Zip Code: 33133

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/10/00

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PTD	<input checked="" type="checkbox"/> Delete
NAME	HART, FREDERICK	
STREET ADDRESS	3205 BIRD AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MCKITTERICK, RUSSELL	
STREET ADDRESS	3217 BIRD AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	VICE DIRECTOR	<input type="checkbox"/> Delete
NAME	BETANCOURT, MILLE	
STREET ADDRESS	3211 BIRD AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GONZALES, RICHARD	
STREET ADDRESS	3203 BIRD AV	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	VICE PRESIDENT	<input type="checkbox"/> Delete
NAME	TORRES, PEDRO	
STREET ADDRESS	3201 BIRD AVE	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	D	<input type="checkbox"/> Delete
NAME	ABETY, MODESTO	
STREET ADDRESS	9955 SW 138 ST	
CITY-ST-ZIP	MIAMI FL 33176	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT / DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AMBER KAPUA	
STREET ADDRESS	3205 BIRD AVE	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OSCAR TORRES	
STREET ADDRESS	3205 BIRD AVE	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TERESA DROWKE	
STREET ADDRESS	3219 BIRD AVENUE	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FERNANDO PALAZAS	
STREET ADDRESS	3205 BIRD AVENUE	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	LANE BENDIG	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3211 BIRD AVENUE	
STREET ADDRESS	MIAMI FL 33133	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)