2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 744169

1. Entity Name

CASA GRANADA CONDOMINIUM ASSOCIATION, INC.

GUARANTEE MGT SERVIE 111 FONTAINEBLEAU BLVD MIAMI FL 33172-4507

Principal Place of Business

Mailing Address

GUARANTEE MGT SERVICES 111 FONTAINEBLEAU BLVD MIAMI FL 33172-4507

FILED Feb 14, 2000 8:00 am Secretary of State

02-14-2000 90165 003 ****61.25

PAATOROO



Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State				81 8 81 8 81 \$18	I BIBN 1981	
					DO NOT WRITE IN THIS SPACE			
				4. FEI Number 59-1982075			plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of State	tus Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current I	Registered Agent		7. Name and Addre	ess of New Registered			
	The second second second	الرابل المنظم المناسطة في المناسطة المن	- Name-	الماسي المستهارة إلى	<u>.</u>	المتعد الموسودي		
GUARANTEE MANGEMENT SERVICES INC ATTN: SHARMAN KILLIAN 111 FONTAINEBLEAU BLVD			Street A	Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL			City	City FL Zip Code)	
	named entity submits this statement for					-		
IGNATURE _	Signature, typed or printed name of registered agent a FILE NOW: FEE IS \$61.25	9. Election Campaigr	plicable. (NOTE: Registered Agent signature required Blection Campaign Financing \$5.0 Trust Fund Contribution.		Make Check Departmen			
1	OFFICERS AND DIR	RECTORS	11.	ADDITIONS/CHANGES	S TO OFFICERS AND D	IRECTORS IN	10	
D. TLE	VP	₹ Delete	TITLE	Vice Preside		Change	Addition	
AME	PEREZ, SOFIA		NAME	Erika Lang	, 42	4-4		
REET ADDRESS	8701 SW 141 ST. #G8		STREET ADDRESS	8701 SW 141	St., #K-7			
ry-st-zip	MIAMI FL 33176		CITY-ST-ZIP	Miami, FL 33	176			
TLE	D	☐ Delete	TITLE	Treasurer/	<u> </u>	Change	☐ Addition	
ME	VOLPE, SALVATORE		NAME	Victor Salva	ador			
REET ADDRESS	8585 SW 148 TERR		STREET ADDRESS	8701 SW 141				
	8585 SW 148 TERR MIAMI-FL		STREET ADDRESS CITY-ST-ZIP		St., #E-1			
ry-st-zip	MIAMI-FL P	∑ Delete		8701 SW 141	St., #E-1	Change	☐ Addition	
TY-ST-ZIP TLE IME	MIAMI FL P KANTROWITZ, JACK	₹¶ Delete	CITY-ST-ZIP TITLE NAME	8701 SW 141 Miami, FL 37 President / D Maria Sallin	St., #E-I 3176 g	Change	☐ Addition	
TY-ST-ZIP "LE ME REET ADDRESS	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST	∑ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	8701 SW 141 Miami, FL 37 President () Maria Sallin 8701 SW 141	St., #E-1 3176 g St., #F-6	⊠ _Change	☐ Addition	
TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	8701 SW 141 Miami, FL 3 President D Maria Sallin 8701 SW 141 Miami, FL 33	St., #E-1 3176 g St., #F-6			
TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD	S⊈ Delete Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	8701 SW 141 Miami, FL 3 President / D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary / D	St., #E-1 3176 g St., #F-6	Change		
TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD SALLING, MARIA		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	8701 SW 141 Miami, FL 37 President / D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary / D Maritza Marr	St., #E-1 3176 g St., #F-6 176			
TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD SALLING, MARIA 8701 SW 141 ST. #F-6		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	8701 SW 141 Miami, FL 3 President / D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary / D	St., #E-1 3176 g St., #F-6 176			
TY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD SALLING, MARIA 8701 SW 141 ST. #F-6 MIAMI FL 33176	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	8701 SW 141 Miami, FL 37 President / D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary / D Maritza Marr	St., #E-1 3176 g St., #F-6 176 ero St., #K-8	15□ Change	Addition	
TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD SALLING, MARIA 8701 SW 141 ST. #F-6 MIAMI FL 33176 D		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	8701 SW 141 Miami, FL 3 President D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary D Maritza Marr 8701 SW 141	St., #E-1 3176 g St., #F-6 176 ero St., #K-8		Addition	
TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD SALLING, MARIA 8701 SW 141 ST. #F-6 MIAMI FL 33176 D LOPEZ, HERNAN	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	8701 SW 141 Miami, FL 3 President D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary D Maritza Marr 8701 SW 141	St., #E-1 3176 g St., #F-6 176 ero St., #K-8	15□ Change	Addition	
TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD SALLING, MARIA 8701 SW 141 ST. #F-6 MIAMI FL 33176 D LOPEZ, HERNAN 7951 SW 35 TR	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	8701 SW 141 Miami, FL 3 President D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary D Maritza Marr 8701 SW 141	St., #E-1 3176 g St., #F-6 176 ero St., #K-8	15□ Change	Addition	
TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP	MIAMI FL P KANTROWITZ, JACK 12249 S.W. 139 ST MIAMI FL 33186 STD SALLING, MARIA 8701 SW 141 ST. #F-6 MIAMI FL 33176 D LOPEZ, HERNAN	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	8701 SW 141 Miami, FL 3 President D Maria Sallin 8701 SW 141 Miami, FL 33 Secretary D Maritza Marr 8701 SW 141	St., #E-1 3176 g St., #F-6 176 ero St., #K-8	15□ Change	☐ Addition	
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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: