2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2001 8:00 am
Secretary of State
04-13-2001 90095 010 ****61.25

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DOCUMENT # 744169

1. Entity Name

CASA GRANADA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
GUARANTEE MGT SERVIE 111 FONTAINEBLEAU BLVD MIAMI FL 33172-4507 US	GUARANTEE MGT SERVICES 111 FONTAINEBLEAU BLVD MIAMI FL 33172-4507 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Bonath de Mgmt. Group	Bonath de Mgmt Group
Suite, Apt. #, etc.: 2050 Coral Way, #515	Suite, Apt. #, etc.: PO Box 521458
City & State: Miami, Fl.	City & State: Miami, Fl.
Zip: 33145 Country: US	Zip: 33152 Country: US

4. FEI Number: 59-1982075 ☐ 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
GUARANTEE MANGEMENT SERVICES INC ATTN: SHARMAN KILLIAN 111 FONTAINEBLEAU BLVD MIAMI FL 33172	Name: Ricardo Russi Street Address (P.O. Box Number is Not Acceptable): Bonath de Management Group 2050 Coral Way Suite 515 City: Miami FL Zip Code: 33145

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 _____ DATE 4/10/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD LANG, ERIKA 8701 SW 141 ST., #K-7 MIAMI FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VOLPE, SALVATORE 8585 SW 148 TERR MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SALLING, MARIA 8701 SW 141 ST., #F-6 MIAMI FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MARRERO, MARITZA 8701 SW 141 ., ST. #K-8 MIAMI FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOPEZ, HERNAN 7951 SW 35 TR MIAMI FL 33176	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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: Maria Salling PRESIDENT April 10, 2001 305 253-9825

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