

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 744404

FILED
Jan 24, 2002 8:00 AM
Secretary of State

Entity Name: EDGEWATER BAY ASSOCIATION, INC.

Current Principal Place of Business:

725 N.E. 22 STREET
UNIT #8
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

725 NE 22 ST
UNIT #8
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOIKO, BRUCE M.
801 BRICKELL AVE
SUITE 1501
MIAMI, FL 33131

Name and Address of New Registered Agent:

BREAUX, DON C
1601 N. PALM AVENUE
SUITE 304D
PEMBROKE PINES, FL 33026 US

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: DON C. BREAUX

01/24/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ESPINO, OMAR
Address: 725 NE 22 ST., #5
City-St-Zip: MIAMI, FL

Title: STD () Delete
Name: TOMPKINS, MARGARET,
Address: 725 N.E. 22ND ST. #8
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: GUTIERREZ, JOSE
Address: 261 NW 56 CT
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ESPINO, OMAR
Address: 725 NE 22 ST., #5
City-St-Zip: MIAMI, FL 33137

Title: PD (X) Change () Addition
Name: LEVINE, STEPHEN
Address: 725 N.E. 22ND ST. #8
City-St-Zip: MIAMI, FL 33137

Title: STD (X) Change () Addition
Name: RAMIREZ, MARIO
Address: 725 N.E. 22ND STREET #1
City-St-Zip: MIAMI, FL 33127

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN LEVINE

PD

01/24/2002

Electronic Signature of Signing Officer or Director

Date