

607 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 747437

1. Entity Name
JOSA CONDOMINIUM ASSOCIATION, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 MAR 30 AM 9:57

Principal Place of Business Mailing Address
70-01 113th Street 70-01 113th Street
Forest Hill, NY 11375 Apt. 1J
Forest Hill, NY 11375

2. Principal Place of Business 3. Mailing Address
1206 Columbus Boulevard 1206 Columbus Boulevard
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Coral Gables, Florida Coral Gables, Florida
Zip Country Zip Country
33134 33134



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
~~MANUEL L. CARRENO~~
1262 S.W. 131st Court
Miami, FL 33184

7. Name and Address of New Registered Agent
Name: **Rafael Azcue**
Street Address (P.O. Box Number is Not Acceptable): **1206 Columbus Boulevard**
City: **Coral Gables** FL Zip Code: **33134**

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: *Rafael Azcue*
RAFAEL AZCUE

March 10, 2000
DATE

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000, Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|-----------------------|--|
| PD | <input checked="" type="checkbox"/> Delete |
| GARCIA, Carlos | |
| 70-01 113th Street | |
| Forest Hill, NY 11375 | |
| SD | <input checked="" type="checkbox"/> Delete |
| GARCIA, Sonia | |
| 70-01 113th Street | |
| Forest Hill, NY 11375 | |
| D | <input checked="" type="checkbox"/> Delete |
| GARCIA, SR. Carlos | |
| 70-01 113th Street | |
| Forest Hill, NY 11375 | |
| | <input type="checkbox"/> Delete |
| | |
| | <input type="checkbox"/> Delete |
| | |
| | <input type="checkbox"/> Delete |
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| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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| CITY-ST-ZIP | |

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|-------------------------|--|
| PD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| AZCUE, Rafael | |
| 1206 Columbus Boulevard | |
| Coral Gables, FL 33134 | |
| STD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| AZCUE, Miriam C. | |
| 1206 Columbus Boulevard | |
| Coral Gables, FL 33134 | |
| VP/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| AZCUE, RALPH | |
| 1206 Columbus Boulevard | |
| Coral Gables, FL 33134 | |
| | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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REINSTATEMENT 96-00

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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 607, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Rafael Azcue*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RAFAEL AZCUE

03-10-2000 (305) 856-1233
Date Daytime Phone #