

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748275

1. Entity Name

TAMIAMI VILLAGE CONDOMINIUM ASSOCIATION, INC.

FILED
Jun 07, 2000 8:00 am
Secretary of State

06-07-2000 90434 046 ****61.25

Principal Place of Business

1131 S.W. 105TH AVE.
MIAMI FL 33174

Mailing Address

2026 S.W. 1ST STREET
STE. 6
MIAMI FL 33135-1680

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1946443

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

DE LA RIONDA, CARLOS
2026 S.W. 1ST STREET
STE. 6
MIAMI FL 33135

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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 ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP
DS
RIONDA, HORTENSIA
2026 SW 1ST-ST., STE. 6
MIAMI FL

TITLE ☐ Change ☒ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP
33135

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP
DVP
ABREU, EPIFANIO
1001 SW 105 AVE #108
MIAMI FL 33174

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP
DIRECTOR / PRESIDENT

TITLE ☒ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP
DVP
PICKMAN, JENNY
29101 KANSAS RD
NARANJA FL 33033

TITLE ☐ Change ☒ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP
DIRECTOR / ASSISTANT V.P.
BERENICE MORALES
1121 SW 105 AVENUE # 303
MIAMI Florida 33174

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP
DP
OTANO, PEDRO
1001 SW 105 AVE #116
MIAMI FL 33174

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP
DIRECTOR / VICE PRESIDENT

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP
DT
WEVERSON, CORREIA
1151 SW 105 AVENUE #402
MIAMI FL 33174

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ 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

4/18/2000

305-642-5223

Date

Daytime Phone #

1 CR2E037 (9/99)