## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 25, 2001 8:00 am Secretary of State **DOCUMENT # 748275** 1. Entity Name 04-25-2001 90116 034 \*\*\*\*61.25 TAMIAMI VILLAGE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1131 S.W. 105TH AVE. 2026 S.W. 1ST STREET MIAMI FL 33174 STE. 6 MIAMI FL 33135 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1946443 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required... 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) DE LA RIONDA, CARLOS 2026 S.W. 1ST STREET STE. 6 City Zip Code **MIAMI FL 33135** FI 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 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be **FEE IS \$61.25** Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. DIRECTOR VICE PRESIDENT Change MANUEL VERA 1121 SW. 105 AVE. #315 Addition CR2E037 (10/00) DS TITLE M Delete TITLE RIONDA, HORTENSIA NAME NAME STREET ADDRESS STREET ADDRESS 2026 SW 1ST ST., STE. 6 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33135** DP Change ☐ Addition TITLE Delete TITLE NAME ABREU, EPIFANIO NAME STREET ADDRESS STREET ADDRESS 1001 SW 105 AVE #108 CITY-ST-ZIP-CITY-ST-ZIP~ **MIAMI FL 33174** DIRECTOR GECRETARY Addition Delete ☐ Change TITLE LUIS B CANTZARES NAME MORALES, BERENICE NAME 1111 50.105 STREET ADDRESS 1121 SW 105 AVE #303 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33174 Delete TITLE TITLE ☐ Change ☐ Addition NAME OTANO, PEDRO NAME STREET ADDRESS STREET ADDRESS 1001 SW 105 AVE #116 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33174 ☐ Defete ☐ Change ☐ Addition NAME WEVERSON, CORREIA NAME STREET ADDRESS STREET ADDRESS 1151 SW 105 AVENUE #402 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33174** TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.