

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90102 001 ****30.62

05-19-2002 90102 002 ****30.63

DOCUMENT # 748410

1. Entity Name

GRAND CANAL HOMES CONDOMINIUM NO. 133, INC.

Principal Place of Business

Mailing Address

7175 S.W. 8TH ST..
SUITE 204
MIAMI FL 331447175 S.W. 8TH ST..
SUITE 204
MIAMI FL 33144

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

NOT APPLICABLE

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

SANTAMARINA, GEORGE M.
7175 SW 8TH ST. SUITE 204
MIAMI FL 33144

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 \$61.259. 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 PD ☐ Delete
NAME LOU-POC, JOSE LUIS
STREET ADDRESS 524 S.W. 96TH CT.
CITY-ST-ZIP MIAMI FLTITLE PD ☒ Change ☐ Addition
NAME LOU-POC, JOSE LUIS
STREET ADDRESS 526 SW 96th Court
CITY-ST-ZIP Miami, FL 33174TITLE D ☐ Delete
NAME CARRION, NENA
STREET ADDRESS 524 SW 96 COURT
CITY-ST-ZIP MIAMI FL 33174TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D ☒ Delete
NAME CHANG DE TOW, ROSA
STREET ADDRESS 524 SW 96TH COURT
CITY-ST-ZIP MIAMI FL 33174TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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 an other like empowered.

SIGNATURE: *X NENA CARRION* **NOT REQUIRED** NENA Carrion 2. 4/24/02 305-261-4683

CR2E037 (9/01)