

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 749808

FILED
Aug 07, 2003
Secretary of State

Entity Name: DICKENS GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7830 DICKENS AVE 501
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

7830 DICKENS AVE 501
MIAMI BEACH, FL 33141

New Mailing Address:

7830 DICKENS AVE 301
MIAMI BEACH, FL 33141

FEI Number: 59-2093436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIN, RAFAEL
7830 DICKENS AVE 501
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

LOLI, TONY
7830 DICKENS AVE 301
MIAMI BEACH, FL 33141 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: TONY LOLI

08/07/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARIN, RAFAEL
Address: 7830 DICKENS AVE 501
City-St-Zip: MIAMI BEACH, FL 33141

Title: VD () Delete
Name: LOLI, ANTONIO
Address: 7830 DICKENS AVE 301
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD () Delete
Name: KIRK, VIVIAN
Address: 7830 DICKENS AVE 502
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD () Delete
Name: WALKER, ANGELA
Address: 7830 DICKENS AVE 202
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOLI, ANTONIO
Address: 7830 DICKENS AVE 301
City-St-Zip: MIAMI BEACH, FL 33141

Title: VD (X) Change () Addition
Name: PERAZZO, LUIS
Address: 7830 DICKENS AVE 404
City-St-Zip: MIAMI BEACH, FL 33141

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SUAREZ, BRIGITTE
Address: 7830 DICKENS AVE 203
City-St-Zip: MIAMI BEACH, FL 33141

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: VIVIAN KIRK

TD

08/07/2003

Electronic Signature of Signing Officer or Director

Date