

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751688

1. Entity Name

MONTE BELLO TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1025 WEST 77 STREET
HIALEAH, FL. 33014

Mailing Address

2011 WEST 62 STREET
HIALEAH, FL. 33016

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

592253631

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

AMERICA MANAGEMENT & REALTY, INC.

2011 WEST 62 STREET
HIALEAH, FL. 33016

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

HENRY HERNANDEZ

4/19/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD. ☐ Delete
NAME MARCH, SYDNEY
STREET ADDRESS 1025 WEST 77 STREET # H
CITY-ST-ZIP HIALEAH, FL. 33014

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME LOPEZ, ALONSO
STREET ADDRESS 1025 WEST 77 STREET # G
CITY-ST-ZIP HIALEAH, FL. 33014

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME RIVERA, ORLANDO
STREET ADDRESS 1025 WEST 77 STREET # N
CITY-ST-ZIP HIALEAH, FL. 33014

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

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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:

Sydney J March
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-01

Date

(305) 558-9820

Daytime Phone #

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90176 039 ****70.00

C0057487

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)