## 2002 UNIFORM BUSINESS REPORT (UBR)

12. I hereby certify that the information supplied with the filling indicated on this report or supplemental report is true and

of the corporation or the receiver changed, or on an attachment with as

**SIGNATURE:** 

## FILED Mar 05, 2002 8:00 am Secretary of State **DOCUMENT # 752531** 1. Entity Name TIERRA DEL SOL CONDOMINIUM ASSOCIATION, INC. 03-05-2002 90047 003 \*\*\*\*61.25 Principal Place of Business Mailing Address 6625 W. 4TH AVENUE 6625 W. 4TH AVENUE #238 #238 HIALEAH FL 33012 HIALEAH FL 33012 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2151806 Not Applicable Zio Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MERCEDES R/A 6625 W 4TH AVE #100 HIALEAH FL 33012 Zip 509012 FL the purpose of changing its registered office or registered agent, or both, in the state of Florida. 8. The above named er SIGNATURE Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS Bohines Delete TITLE TITLE 6625 W 4 AW \$ 208 MERCEDES P/A NAME NAME STREET ADDRESS 6625 W 4TH AVE #100 STREET ADDRESS HIRLAK CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL TD Delete TITLE TITLE PEREZ, GERARDO NAME NAME STREET ADDRESS STREET ADDRESS 6625 W. 4TH AVE APT #114 CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL ELENA ALFOUSD 6625 N C/AV #200 **№** Delete TITLE TITLE NAME GONZALES, ANA 6625 W 4TH AVE #219 STREET ADDRESS STREET ADDRESS 33012 H1*のlen*H CITY-ST-ZIP HIALEAH FL 33012 CITY-ST-ZIP Delete Change Addition TITLE RONSANO, MARIANA NAME STREET ADDRESS 6625 W 4TH AVE #229 STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33012 CITY-ST-ZIP Delete Change Addition TITLE TITLE FABIAN, MARRERO JR NAME NAME 6625 W 4TH AVE #229 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33012 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

still does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ed to execute his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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