

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2003 8:00 am
Secretary of State

02-24-2003 90193 048 ****64.00

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1. Entity Name

HIGH VIEW CONDOMINIUM ASSOCIATION INC.



Principal Place of Business

**1145 NW 32ND CT
MIAMI FL 33125-2822**

Mailing Address

**1145 NW 32ND CT
MIAMI FL 33125-2822**

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 **65-0144134**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MORALES, JUAN
1145 NW 32ND CT
MIAMI FL 33125**

JULIA HERRERA

Name

JULIA HERRERA

Street Address (P.O. Box Number is Not Acceptable)

1145 N.W. 32ND CT.

City

MIAMI, FLA 33125

FL

Zip Code

33125

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Julia Herrera*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/19/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORALES, JUAN 1145 NW 32ND CT MIAMI FL ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORALES, MARTHA 1145 NW 32ND CT MIAMI FL ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARRIO, PRIMITIVO 1145 NW 32ND CT MIAMI FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	JULIA HERRERA 1145 N.W. 32ND CT. (P) ☒ Change ☐ Addition MIAMI, FLA 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Natalia Herrera (T) ☐ Change ☒ Addition 1145 NW 32nd Miami FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CARMEN B. Barrio (D) ☐ Change ☒ Addition 1145 NW 32nd Miami FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE:

Julia Herrera
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/03 (305) 541-4577

Date

Daytime Phone #

CR2E037 (10/02)