

2001 UNIFORM BUSINESS REPORT (UBR)

2/2

FILED
Mar 01, 2001 8:00 am
Secretary of State

02-02-2001 90251 001 ****66.25

DOCUMENT # 763750

1. Entity Name

OCEAN BEACH RESORT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

17475 COLLINS AVENUE
MIAMI BEACH FL 33160

Mailing Address

17475 COLLINS AVENUE
MIAMI BEACH FL 33160

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

59-2844404

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

Name

LAMAR, MARIO A

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

3971 SW 8TH STREET

City

Miami, FL

FL

Zip Code

33134

LAMAR, MARIO A
3971 SW 8TH STREET
MIAMI FL 33134

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 \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	GONZALEZ, IVAN	President
STREET ADDRESS	17475 COLLINS AVE APT. 121	
CITY-ST-ZIP	MIAMI BEACH FL 33160	
TITLE	VP	<input type="checkbox"/> Delete
NAME	FERNANDEZ, FRANCISCO A	Vice President
STREET ADDRESS	481 W. 34TH PLACE	
CITY-ST-ZIP	HALEAH FL 33012	
TITLE	S	<input type="checkbox"/> Delete
NAME	CASTELLANOS, RAMON	Secretary
STREET ADDRESS	12210 SW 1ST ST.	
CITY-ST-ZIP	MIAMI FL 33184	
TITLE	T	<input type="checkbox"/> Delete
NAME	HERNANDEZ, ELENA	
STREET ADDRESS	1201 E 7 COURT	
CITY-ST-ZIP	HALEAH FL 33010	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	EVANS, ROY	
STREET ADDRESS	501 NE 14TH AVE.	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	D	<input type="checkbox"/> Delete
NAME	HERNANDEZ, JORGE	
STREET ADDRESS	2753 W. 70TH PL.	
CITY-ST-ZIP	HALEAH FL 33016	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT HERNANDEZ	
STREET ADDRESS	525 E. 18th Hialeah FL 33013	
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN J. ROMANICK	
STREET ADDRESS	524 37th Union City NJ 07087	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/01

(305) 933 870

CR2E037 (10/00)