

2000 UNIFORM BUSINESS REPORT (UBR)

1/26/01

FILED

Apr 18, 2000 8:00 am
Secretary of State

01-26-2000 90035 005 ****61.25

DOCUMENT # 766407

1. Entity Name

IMPERIAL AT BRICKELL CONDOMINIUM ASSOCIATION, IN

Principal Place of Business

Mailing Address

1627 BRICKELL AVENUE
MIAMI FL 33129

1627 BRICKELL AVENUE
MIAMI FL 33129-1223

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

59-2252245

Applied For

Not Applied For

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

KEITH MACK LLP
200 SOUTH BISCAYNE BLVD.
20TH FLOOR
MIAMI FL 33131

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

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	V	☒ Delete
NAME	LEWIS, HARRY	
STREET ADDRESS	1627 BRICKELL AVENUE #1006	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	D	☐ Delete
NAME	MAZER, FLORENCE	
STREET ADDRESS	1627 BRICKELL AVE. #2104	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	TD	☒ Delete
NAME	TALBERT, WILLIAM	
STREET ADDRESS	1627 BRICKELL AVE. #2006	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	SD	☐ Delete
NAME	PERRY, PRISCILLA	
STREET ADDRESS	1627 BRICKELL AVE. #1107	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	P	☐ Delete
NAME	GENTRY JR, SAMUEL W	
STREET ADDRESS	1627 BRICKELL AVE, #2901	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	☒ Delete
NAME	GENTRY, SIGMUND JR.	
STREET ADDRESS	1627 BRICKELL AVE #2901	
CITY-ST-ZIP	MIAMI FL 33129	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	John Rivella	
STREET ADDRESS	1627 Brickell Ave. #2501	
CITY-ST-ZIP	Miami, FL 33129	☐ Change ☐ Addition
TITLE	T	☒ Change ☐ Addition
NAME	Mazer, Florence	
STREET ADDRESS	1627 Brivckell Ave. #2104	
CITY-ST-ZIP	Miami, FL 33129	☐ Change ☒ Addition
TITLE	S	☐ Change ☐ Addition
NAME	Mindy Pallot	
STREET ADDRESS	1627 Brickell Ave. # 1802	
CITY-ST-ZIP	Miami, FL 33129	☒ Change ☐ Addition
TITLE	vp	☐ Change ☐ Addition
NAME	Priscilla Perry	
STREET ADDRESS	1627 Brickell Avenue #1107	
CITY-ST-ZIP	Miami, FL 33129	☐ Change ☐ Addition
TITLE	P	☐ Change ☐ Addition
NAME	Samuel W. Gentry, Jr.	
STREET ADDRESS	1627 Brickell Avenue #2901	
CITY-ST-ZIP	Miami, FL 33129	☒ 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/15/00

305-523-3403

Date

Daytime Phone