

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

FILED
Jan 16, 2003 8:00 am
Secretary of State

01-16-2003 90051 028 ****61.25

DOCUMENT # 767115

1. Entity Name

INTERNATIONAL PARK CONDOMINIUM I ASSOCIATION, IN C.



Principal Place of Business

**11750 - 11780 SW 18TH ST
MIAMI FL 33162**

Mailing Address

**2500 NW 97 AVE
SUITE 200
MIAMI FL 33172**

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 **59-2247624**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SPM GROUP, INC
2500 NW 97 AVE
SUITE 200
MIAMI FL 33172**

7. Name and Address of New Registered Agent

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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ARCILA, LUZ 11750 SW 18TH ST #530 MIAMI FL 33175 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Carbonell, Edita 11780 SW 18 ST #327 Miami, FL 33175 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ARBOLEDA, MARIA 11780 SW 18TH ST #410 MIAMI FL 33175 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Lobaina, Iluminada 11780 SW 18 ST #114 Miami, FL 33175 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD DEL CAMPO, ELA 11780 SW 18TH ST #205 MIAMI FL 33175 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Rodriguez, Pilar 11750 SW 18 ST #514 Miami, FL 33175 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALVAREZ, MARIANA 11750 SW 18 ST, APT 513 MIAMI FL 33175 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Otero, Ramon 11750 SW 18 ST #114 Miami, FL 33175 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, ROBERTO 11780 SW 18 ST, APT 411 MIAMI FL 33175 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ramos, Marlene 11780 SW 18 ST #504 Miami, FL 33175 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 an other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-03

305-444-6757

CR2E037 (10/02)