

2001 UNIFORM BUSINESS REPORT (UBR)

0008915 AF

DOCUMENT # **A96000001085**

1. Entity Name

300 ARAGON HOLDING LTD.

FILED

01 MAY -1 6:58

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**800 ARAGON AVENUE
CORAL GABLES FL 33146**

Mailing Address

**200 SOUTH BISCAYNE BLVD., SUITE 4015
MIAMI FL 33131**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1548 BRICKELL AVE.

Suite, Apt. #, etc.

3. Mailing Address

1548 BRICKELL AVE.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0669189

Applied For

Not Applicable

Zip

33129-1210

Country

USA

Zip

33129-1210

Country

USA

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SALUSSOLIA, PIERO

200 SOUTH BISCAYNE BLVD., SUITE 4015

MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

SALUSSOLIA, PIERO

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

1548 BRICKELL AVE.

City

MIAMI

FL

Zip Code

33129-1210

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.

PIERO SALUSSOLIA

(NOT: Registered Agent signature required when reinstating)

DATE

04/26/01

9. Capital Contributions
as Shown on record.

\$692,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P96000044649**
NAME **300 ARAGON, INC.**
STREET ADDRESS **4043 W. FLAGLER ST., SUITE 505**
CITY - ST - ZIP **MIAMI FL 33134**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **1548 BRICKELL AVE.**

CITY - ST - ZIP **MIAMI, FL 33129-1210**

STREET ADDRESS **000004220970--D**
CITY - ST - ZIP **05/16/01 01124--004**
*******526.25 *****526.25**

STREET ADDRESS
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CITY - ST - ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

ALESSIA MARZULLI

Date

Daytime Phone #

04/26/01 305-373-7016

CR2E003 (11/00)