.2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **G74682** Jan 28, 2000 8:00 am 1. Entity Name MONTEREY VILLAGE DEVELOPMENT CORP. **Secretary of State** 01-28-2000 90160 046 ***150.00 Mailing Address Principal Place of Business 700 NW 107 AVE 4 FLOOR 700 NW 107 AVE 4 FLOOR MIAMI FL 33172-3161 MIAMI FL 33172 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-2343136 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MCCAIN, DAVID B. Street Address (P.O. Box Number is Not Acceptable) 700 NW 107 AVE 4 FLOOR **MIAMI FL 33172** Zip Code City FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition CD ☐ Delete TITLE ☐ Change TITLE MILLER, LEONARD NAME NAME STREET ADDRESS STREET ADDRESS 700 NW 107TH AVE/4TH FL CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Change Addition ☐ Delete TITLE TITLE MCCAIN, DAVID B NAME NAME STREET ADDRESS STREET ADDRESS 700 NW 107 AVENUE CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33172 ☐ Change Addition ☐ Delete TITLE TITLE PEKOR, ALLAN J. NAME NAME 700 NW 107TH AVE/4TH FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33172** ☐ Change ☐ Addition ☐ Delete TITLE TITLE MALCOLM, WAYNEWRIGHT NAME NAME STREET ADDRESS **700 NW 107 AVENUE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 Addition ☐ Change ☐ Delete TITLE MILLER, STUART A. NAME STREET ADDRESS STREET ADDRESS 700 NW 107 AVENUE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33172** ☐ Change ☐ Addition Delete TITLE TITLE SIERRA, KATHLEEN E. NAME NAME STREET ADDRESS 700 NW 107TH AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172

13. Thereby 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if DAVID B. MCCAIN

SIGNATURE:

WICE PRESIDENT 1 8 90 (305) 485 -2070

AND TYPED OR POINTED NAME OF SIGNING OFFICER OR DIRECTOR

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