

2001 UNIFORM BUSINESS REPORT (UBR)

Amended
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 01 SEP 26 AM 11:17

DOCUMENT # **K70918**
 1. Entity Name
GABLES PROPERTIES, INC.

Principal Place of Business Mailing Address
14 Navarre Avenue, Apt. 27 P.O. Box 65-0969
Apt. #27 Miami, FL 33265-0969
Coral Gables, FL 33134

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 **65-011192** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Enciso, Rosa Ma.
14 Navarre Avenue, Apt.#27
Coral Gables, FL 33134

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.
 SIGNATURE *Rosa Ma Enciso* **Rosa Ma. Enciso, Secretary** **9/14/01**
(NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Chiari, R., Ricardo 14 Navarre Ave. Apt.#27 Coral Gables, FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Gallagher, Bert 14 Navarre Ave., Apt.#27 Coral Gables, FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV De Paredes, Gaspar G. 14 Navarre Ave., Apt.#27 Coral Gables, FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Enciso, Rosa Ma. 14 Navarre Ave., Apt.#27 Coral Gables, FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Muxo, Maria Luisa 14 Navarre Ave., Apt.#27 Coral Gables, FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300004538649--8 -10/01/01--01092--021 *****26.25 *****26.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300004538649--8 -08/16/01--01070--015 *****35.00 *****35.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition SP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rosa Ma Enciso* **9/14/01** **(305)412-0644**
DATE DAYTIME PHONE #

CR2E034 (4/1/00)

Gables Properties, Inc.

ps 7/29

P.O. Box 65-0969
Miami, FL 33265

July 29, 2001

VIA FAX

Division of Corporations
Amendment Request
State of Florida

900004538649--8
-08/16/01-01070-015
*****35.00 *****35.00

Re: Document #K70918

To Whom It May Concern:

We are requesting to change the Principal Place of Address and the Mailing Address for our business: Gables Properties, Inc.

Principal Place of Business: 14 Navarre Avenue, #27
Coral Gables, Florida 33134

Mailing Address: Gables Properties, Inc.
P. O. Box 65-0969
Miami, FL 33265-0969

Telephone No. (305) 412-0644

Enclosed is the photocopy of our 2001 UBR Form, please note that the officers and directors addresses have also changed to the Principal Place of Business as follows:

Chiari, Ricardo R. (DP)
14 Navarre Avenue, #27
Coral Gables, FL 33134

Enciso, Rosa Ma. (DS) & Register Agent
14 Navarre Avenue, #27
Coral Gables, FL 33134

Gallagher, Berta (DV)
14 Navarre Avenue, #27
Coral Gables, FL 33134

Muxo, Maria Luisa (T)
14 Navarre Avenue, #27
Coral Gables, FL 33134

De Paredes, Gaspar G. (DV)
14 Navarre Avenue, #27
Coral Gables, FL 33134

If you need any additional information to make these changes, you can contact me at (305) 412-0644, Fax (305) 271-2855.

Sincerely,

Maria Luisa Muxo
Maria Luisa Muxo
Treasurer

/mlm