

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 31, 2001 08:00 AM****Secretary of State****DOCUMENT # N00000000118**

1. Entity Name

WPG CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

13000 S.W. 120TH STREET

MIAMI
33186

FL

Mailing Address

13000 S.W. 120TH STREET

MIAMI
33186

FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

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

SIMON GARY P
9100 SO. DADELAND BLVD.
SUITE 504
MIAMI
331567815 US

FL

Name
MARQUEZ HENRYStreet Address (P.O. Box Number is Not Acceptable)
12030 SW 131 AVENUECity
MIAMI

FL

Zip Code
33186

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 **HENRY MARQUEZ****05/31/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	STD	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERRIN ROSE		NAME	REYNOLDS MARK	
STREET ADDRESS	13000 S.W. 120TH STREET		STREET ADDRESS	P.O.BOX256 4288 W.DUBLIN GRANVILLE ROAD	
CITY-ST-ZIP	MIAMI FL 33186		CITY-ST-ZIP	DUBLIN OH 43017	
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERRIN ARTHUR		NAME	BLANCO MARLENE	
STREET ADDRESS	13000 S.W. 120TH STREET		STREET ADDRESS	12030 SW 131 AVENUE	
CITY-ST-ZIP	MIAMI FL 33186		CITY-ST-ZIP	MIAMI FL 33186	
TITLE	PD	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRANOFF EDWARD		NAME	MARQUEZ HENRY	
STREET ADDRESS	13000 S.W. 120TH STREET		STREET ADDRESS	12030 SW 131 AVENUE	
CITY-ST-ZIP	MIAMI FL 33186		CITY-ST-ZIP	MIAMI FL 33186	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Henry Marquez

D

05/31/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)