

2001 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 19, 2001 8:00 am
Secretary of State

05-16-2001 90189 046 ****61.25

DOCUMENT # N00000008007

1. Entity Name

2940-42 LOUISE STREET HOMEOWNERS ASSOCIATION, IN

Principal Place of Business

2761 W. TRADE AVE.
 COCONUT GROVE FL 33133

Mailing Address

2761 W. TRADE AVE.
 COCONUT GROVE FL 33133

2. Principal Place of Business

2940 LOUISE STREET

Suite, Apt. #, etc.

3. Mailing Address

2940 LOUISE ST.

Suite, Apt. #, etc.

City & State

COCONUT GROVE FL.

City & State

COCONUT GROVE, FL.

Zip

33133

Country

USA

Zip

33133

Country

USA

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUIS, MIKE A
2761 W. TRADE AVE.
COCONUT GROVE FL 33133

7. Name and Address of New Registered Agent

Name: **JOSE RODRIGUEZ**
 Street Address (P.O. Box Number is Not Acceptable): **2940 LOUISE STREET**
 City: **MIAMI** FL Zip Code: **33133**

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)

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE: **DPST** ☒ Delete
 NAME: **LUIS, MICHAEL A**
 STREET ADDRESS: **2761 W. TRADE AVE.**
 CITY-ST-ZIP: **COCONUT GROVE FL 33133**

TITLE: **D** ☒ Delete
 NAME: **MICALI, JOHN S**
 STREET ADDRESS: **13301 SW 124TH ST.**
 CITY-ST-ZIP: **MIAMI FL 33186**

TITLE: **D** ☒ Delete
 NAME: **DURET, JEAN L**
 STREET ADDRESS: **13301 SW 124TH ST.**
 CITY-ST-ZIP: **MIAMI FL 33186**

TITLE: ☐ Delete
 NAME: ☐ Delete
 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
 NAME: ☐ Delete
 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
 NAME: ☐ Delete
 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **DP** ☒ Change ☒ Addition
 NAME: **JOSE O. RODRIGUEZ**
 STREET ADDRESS: **2940 LOUISE ST.**
 CITY-ST-ZIP: **MIAMI, FL 33133**

TITLE: **DST** ☒ Change ☐ Addition
 NAME: **ROBERTO PENA**
 STREET ADDRESS: **2940 LOUISE ST.**
 CITY-ST-ZIP: **MIAMI, FL 33133**

TITLE: **D** ☒ Change ☐ Addition
 NAME: **LUIZ E. MORA**
 STREET ADDRESS: **2940 LOUISE ST.**
 CITY-ST-ZIP: **MIAMI, FL 33133**

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED: LUIS, President

Date

Daytime Phone #

CR2E037 (10/00)