2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N01000008233

1. Entity Name

MUTINY ON THE PARK CONDOMINIUM ASSOCIATION, INC.



May 05, 2003 8:00 ams Secretary of State

05-05-2003 90320 048 ****61.25

2410)

Principal Place of Business Mailing Address 1001 BRICKELL BAY DR., STE. 2410 1001 BRICKELL BAY DR., STE. **MIAMI FL 33131** MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address M CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 65-1157854 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **DUNIN, RICARDO** Street Address (P.O. Box Number is Not Acceptable) 1001 BRICKELL BAY DR., STE. 2410 **MIAMI FL 33131** City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DP TITLE TITLE ☐ Change ☐ Addition Delete NAME PETERSEN, JOHN NAME 1001 BRICKELL BAY DR., STE. 2410 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 ☐ Delete Change Addition TITLE TITLE **BUENO, CARLOS** NAME NAME STREET ADDRESS 1001 BRICKELL BAY DR., STE. 2410 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 Delete Addition TITLE TITLE JAVIER GONZHES
1001 Brickell Bay DRIVE, Soite 240
MIAMI, FL 33 131 CHESNICK, ANDREW NAME NAME -1001 BRICKELL BAY DR., STE. 2410 🖰 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33131** TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE 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)(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 of 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 an address, with all other like empowered changed, or on an attachment w

SIGNATURE:

705-373-5020