2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
04-24-2001 90029 009 ****70.00

DOCUMENT # N04523

1. Entity Name

The O.D.A. Homes Condominium Assoication, Inc.

A0055059

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
6001 SW 137th Ct. A Miami, Fl. 33183	13876 SW 56th St. 265 Miami, Fl. 33175

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 59-2544131 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired — XX — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Mr. Gilberto Mantilla 13876 SW 56th St.# 265 Miami, Fl. 33175	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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Mantilla, Gilberto 6601A SW 137th Ct. Miami, Fl. 33183	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Villegas, Leonor 14243 NW 22nd St, Pembroke Pines,FL 33028	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Villegas, Leonor 14243 NW 22nd St. Pembroke Pines,FL 33028	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Moreno, Luis 6601A SW 137th Ct. Miami FL 33183	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Junyent, Oscar 6671C SW 137 Ct. Miami, FL 33183	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Martinez, Ofelia 6601C SW 137 Ct. Miami, FL 33183	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/00)

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: _____ (P) MANTILLA, GILBERTO 03/26/01 305 595-3020

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #