

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N04523

1. Entity Name

THE O.D.A. HOMES CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90936 046 ****61.25

0026893

Principal Place of Business
6001 SW 137 CT.
UNIT A
MIAMI FL 33183

Mailing Address
13876 SW 56TH ST 265
MIAMI FL 33175
US

80057905



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number
59-2544131

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MANTILLA, GILBERTO
13876 SW 56TH ST #265
MIAMI FL 33175

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 _____
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 NAME STREET ADDRESS CITY-ST-ZIP	PD MANTILLA, GILBERTO 6601A SW 137TH CT. MIAMI FL 33183	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VILLEGAS, LEONOR 14243 NW 22ND ST PEMBROKE PINES FL 33028	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JUNYENT, OSCAR 6671C SW 137 CT MIAMI FL 33183	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARTINEZ, OFELIA 6601C SW 137 CT MIAMI FL 33183	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUIS ARDERI 6611-D SW 137CT. MIAMI FL 33183	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS 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: GILBERTO MANTILLA 01/08/02 305395-3020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)