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

## **DOCUMENT # N06629**

1. Entity Name

U. H. CONDOMINIUM ASSOCIATION, INC.



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90831 047 \*\*\*\*61.25

rincipal Place of Business 1041 SW 54 STREET DRT LAUDERDALE FL 33328		Mailing Address 11041 SW 54 STREET FORT LAUDERDALE FL 33328						
. Principal P	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 6	4. FEI Number 65-0132374		Applied For Not Applicable	
Zip -	Country	Zip	Country	5. Certificate of St		\$8.75 Add	ditional	
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Registered A	gent		
			Name					
	, Pietro V 54 street Uderdale Fl 33328		Street Address		Not Acceptable)			
·	ODENDALE PL 33320		City		FL	Zip Cod	e	
	named entity submits this statement folions of registered agent.  Signature, typed or printed name of registered agent.		egistered office or reg		the State of Florida. I am fa	amiliar with,	and accept	
FILE NOW: FEE IS \$61.25  9. Election Campa Trust Fund Con			ntribution.	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State			
ò.	OFFICERS AND DIF		11.	ADDITIONS/CHANGI	ES TO OFFICERS AND DIF	_		<u>ا</u> ي
TLE AME TREET ADDRESS TY-ST-ZIP	PISTONE, PIETRO 11041 SW 54TH ST FT. LAUDERDALE FL 33328	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	CR2E037 (10/02)
TLE AME	PT SILLA, GUY	☐ Delete	TITLE NAME			☐ Change	☐ Addition	SRS
TY-ST-ZIP	8948 NW 21 ST PEMBROKE PINES FL 33024	· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS CITY-ST-ZIP	- ** ·		<u>-</u> -		
TLE Ame Treet address Ty-st-zip	DS PISTONE, JOSEPHINA MRS 11041 SW 54 ST FORT LAUDERDALE FL 33328	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TLE AME TREET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TLE AME REET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TLE AME REET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	i

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:

FRETOR GENTLED

19/03 954-434-53-79