UNIFORM BUSINESS REPORT	
DOCUMENT # NO 8351 1. Entity Name	02 DEC -9 AMII: 45
Fontang Point Conclominium Assoc	secretary of State rallahassee Florida
DO NOT WRITE IN THIS SP	
2. Principal Place of Business SPM Group 2500 MJ. 97, 2500 N. ω.	97 Aue
Suite, Apt. #, etc. Suite # 200 # 200	DO NOT WRITE IN THIS SPACE
City & State Might, Florida Might F	Florida 4. FEI Number Applied For Not Applied For Not Applicable
33(7) USA 33172	Country S. Certificate of Status Desired \$8.75 Additional Fee Required
	7. Name and Address of Current Registered Agent Name S PM CATOLIA INC
DO_NOT_WRITE	Street Address (P.O. Box Number is Not Archeptable)
IN THIS SPACE	Suite #200
8. The above named entity submits this statement for the purpose of changing its re	City Miami > FL 3397)
The door hand drary submits this statement for the purpose of changing its re	
SIGNATURE Signature, typed or printed name of registered agent and unle if applicable. (NOTE: F	Pégisterod Agont signaturo (goired when roinstatung) DATE
FEE IS \$61.25 Initial or Amended UBR 9. Election Camp Trust Fund Co	
10. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP ALIONAL F. (33015)	TITLE NAME STREET ADDRESS
TILLE TD- Benjamin Videl NAME STREET ADDRESS 8250 N.W. 1915+ 10-C	CITY-ST-ZIP TITUE NAME STREET ADDRESS 11/22/02-01087-002 **61.25
CITY-ST-ZIP Mami FL 330/5/	CITY-ST-ZIP TITLE
STREET ADDRESS 8250 N.W. 1915 10-A	NIME STREET ADDRESS
Miam, FL 330/5	TILE IN THE CRACE
WAME STREET ADDRESS 8250 N.W. 1915. 10-4	IN THIS SPACE
TITLE VP-Gabriel Donoso HAME STREET ADDRESS 8210 N.W. 19181 25-A	CITY-ST-ZIP TITLE NAME STREET ADDRESS
Migmi, FL 330/5 ITLE I	CITY-ST-ZIP IIILE NAME STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP

12-07.02
Date Daytime Phone #