

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N10218

1. Entity Name

COUNTRYSIDE VILLAGE CONDOMINIUM "7" ASSOCIATION,

Principal Place of Business

18965 NW 62ND AVE.
HIALEAH FL 33015

Mailing Address

C/O SPM GROUP INC.
2151 LE JEUNE RD S#305
CORAL GABLES FL 33134-4200

2. Principal Place of Business

2500 NW 97 AVE

3. Mailing Address

2500 NW 97 AVE

Suite, Apt. #, etc.

SUITE 200

Suite, Apt. #, etc.

SUITE 200

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33172

Country

USA

Zip

33172

Country

USA

6. Name and Address of Current Registered Agent

YABLIN-SCHNEID, P.A.

699 SOUTH FEDERAL HIGHWAY
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name

Arnold Yablin, P.A.

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

Arnold Yablin, P.A. ARNOLD YABLIN, P.A.

2-8-00

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 PD ☒ Delete
NAME WILD, CURT R JR
STREET ADDRESS 18965 NW 62ND AVE #212
CITY-ST-ZIP HIALEAH FL

TITLE VPD ☐ Delete
NAME GONZALEZ, PEDRO
STREET ADDRESS 18965 NW 62ND AVE #210
CITY-ST-ZIP HIALEAH FL

TITLE TSD ☒ Delete
NAME DIAZ, TANYA
STREET ADDRESS 18965 NW 62ND AVE #202
CITY-ST-ZIP HIALEAH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Change ☒ Addition
NAME MADERA, ANGEL
STREET ADDRESS 18965 NW 62 AVE # 104
CITY-ST-ZIP HIALEAH, FL 33015

TITLE TSD ☐ Change ☒ Addition
NAME SILVA, GLADYS
STREET ADDRESS 18965 NW 62 AVE # 102
CITY-ST-ZIP MIAMI, FL 33015

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

Deborah Dawes 4/4/00 954 385 9980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)



DO NOT WRITE IN THIS SPACE