

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90027 005 ****61.25

DOCUMENT # N12103

1. Entity Name

SOUTHVIEW AT AVENTURA CONDOMINIUM ASSOCIATION, I

Principal Place of Business

Mailing Address

2901 C/O DCI SIMMS ST
 HOLLYWOOD FL 33020

2901 C/O DCI SIMMS ST
 HOLLYWOOD FL 33020

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

59-2574459

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

D.C.I.
 2901 SIMMS ST.
 ATTN: ANDREW MEYROWITZ
 HOLLYWOOD FL 33020

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

Rose W. Gardino

3/16/2000

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
TD	TORRES, JOHN	3440 NE 192ND ST 4N	AVENTURA FL	<input checked="" type="checkbox"/>
P	VIGILANTE, STEVE	3350 NE 192ND ST 4A	AVENTURA FL	<input checked="" type="checkbox"/>
VR	LEO, FRANK	3340 NE 192ND ST 2R	AVENTURA FL	<input checked="" type="checkbox"/>
D	COHEN CHIP	3440 NE 192ND ST 4D	AVENTURA FL	<input checked="" type="checkbox"/>
S	MASSARO, JENNIFER	3440 N.E. 192ND ST	AVENTURA FL 33180	<input type="checkbox"/>
PD	WREN, ELAINE	3440 N.E. 192ND ST	AVENTURA FL 33180	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
TRD	Pereira, Anthony	3440 NE 192 ST #A-2IG	AVENTURA FL 33180	<input type="checkbox"/>	<input type="checkbox"/>
PRE	Winkler Sandy (Alexandra)	3440 NE 192 ST - A-2E	AVENTURA FL 33180	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP	WREN, ELAINE	3440 NE 192 ST - A-SL	AVENTURA FL 33180	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sec	Leja, Jeanne	3350 NE 192 ST - B-1R	AVENTURA FL 33180	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DIR	TORRES JOHN	3440 NE 192 ST - B-4F	AVENTURA FL 33180	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Vigilante, Steve	3350 NE 192 ST - B-4F	AVENTURA FL 33180	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

John Torres

JOHN TORRES 3/17/2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)