

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N13071

1. Entity Name

EL BOSQUE AT LITTLE HAVANA CONDOMINIUM ASSOCIATION, INC.

FILED

02 MAY -7^{APM} 1:03^N D E D "

Principal Place of Business

Mailing Address

2300 Coral Way
Suite 200
Miami, FL 33145

2300 Coral Way
Suite 200
Miami, FL 33145

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

2300 Coral Way
Suite, Apt. #, etc.

2300 Coral Way
Suite, Apt. #, etc.

Suite # 200
City & State

Suite # 200
City & State

Miami, Florida

Miami, Florida

Zip Country
33145 US

Zip Country
33145 US

4. FEI Number

59-2761867

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

FLORIDA ANNUAL REPORT SERVICES, INC.
2300 Coral Way
#200
Miami, FL 33145

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

AMADA CANTERA LOPEZ, President

DATE

4/29/02

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
NAME JIMENEZ PEDRO
STREET ADDRESS 777 SW 9th Avenue #412
CITY-ST-ZIP Miami, FL ☒ Delete

TITLE DS
NAME SUAREZ, GUILLERMO
STREET ADDRESS 777 SW 9th Avenue Apt.420
CITY-ST-ZIP Miami, FL ☒ Delete

TITLE DT
NAME ORTEGA, ADAMINA
STREET ADDRESS 777 SW 9th Avenue Apt 507
CITY-ST-ZIP Miami, FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 PD
NAME LIMA, NELSON
STREET ADDRESS 777 SW 9th Avenue #507
CITY-ST-ZIP Miami, FL ☒ Change ☐ Addition

TITLE SD
NAME GONZALEZ, OSVALDO
STREET ADDRESS 777 SW 9th Avenue #309
CITY-ST-ZIP Miami, FL ☒ Change ☐ Addition

TITLE T
NAME LACAU, LENYS
STREET ADDRESS 777 SW 9th Avenue #222
CITY-ST-ZIP Miami, FL ☒ Change ☐ Addition

TITLE D
NAME CASANOVA, FERNANDO
STREET ADDRESS 777 SW 9th Avenue #311
CITY-ST-ZIP Miami, FL ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/02

CR2E037 (11/00)