

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90057 014 ****70.00

DOCUMENT # N20788

1. Entity Name

KENDALL PARK COMMERCIAL CONDOMINIUM THREE ASSOCI

Principal Place of Business

Mailing Address

~~13000 SW 120 STREET
 MIAMI FL 33186~~

~~13000 SW 120 STREET
 MIAMI FL 33186~~

% CMU Management Co *% CMU Management Co*

2. Principal Place of Business

10934 SW 146 PL

3. Mailing Address

10934 SW 146 PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Miami FL

City & State

Miami FL

4. FEI Number

65-0008701

Applied For

Not Applicable

Zip

33186

Country

DADE

Zip

33186

Country

DADE

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~PERRIN, ROSE
 13000 SW 120 STREET
 MIAMI FL 33186~~

7. Name and Address of New Registered Agent

Name *CMU Management Co*

Street Address (P.O. Box Number is Not Acceptable)
10934 SW 146 PL

City
MIAMI

FL

Zip Code
33186

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

Carmen Vargas **CARMEN VARGAS**

3/30/01
 DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	D FROYO, ANTONIO	13000 S.W. 120TH ST	MIAMI FL	<input type="checkbox"/>
	D FROYO, IVANKA	13000 S.W. 120TH ST.	MIAMI FL	<input checked="" type="checkbox"/>
	D PERRIN, ROSE	13000 S.W. 120TH ST.	MIAMI FL	<input type="checkbox"/>
	D ALTMAN, BILL	12273 SW 132 CT.	MIAMI FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
	VTD			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	PD Whitehouse, Chandra	12259 SW 132 Ct	MIAMI FL 33186	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input 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:

Chandra Whitehouse **Chandra Whitehouse** *3/30/01* *305-387-6267*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)