

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30034

1. Entity Name

SAN SIMEON AT THE CALIFORNIA CLUB CONDOMINIUM AS

Principal Place of Business

21300 SAN SIMEON WY
NO MIAMI BEACH FL 33179
US

Mailing Address

21300 SAN SIMEON WY
NO MIAMI BEACH FL 33179-1130
US

2. Principal Place of Business

21300 SAN SIMEON WAY

Suite, Apt. #, etc.

3. Mailing Address

21300 SAN SIMEON WAY

Suite, Apt. #, etc.

City & State

NORTH MIAMI BEACH, FL

City & State

NORTH MIAMI BEACH, FL

Zip
33179

Country
USA

Zip
33179

Country
USA

4. FEI Number

65-0115762

Applied For

Not Applicable

5. Certificate of Status Desired XXXXX

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VALDOVINOS, JO ANN
P-5
21300 SAN SIMEON WAY
N MIAMI BCH FL 33179

7. Name and Address of New Registered Agent

Name
MOISES ASSAEL

Street Address (P.O. Box Number is Not Acceptable)
21300 SAN SIMEON WAY

0-5

City NORTH MIAMI BEACH, FL Zip Code 33179

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

MOISES ASSAEL

FEBRUARY 14, 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

TITLE	PD	<input type="checkbox"/> Delete
NAME	VALDOVINOS, JO ANN	
STREET ADDRESS	21300 SAN SIMEON WAY, P-5	
CITY-ST-ZIP	N MIAMI BCH FL 33179	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	MORENO, RAMIRO	
STREET ADDRESS	21300 SAN SIMEON WAY, P-1	
CITY-ST-ZIP	N MIAMI BCH FL 33179	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ISSA, CHARLES	
STREET ADDRESS	21300 SAN SIMEON WAY, #0-1	
CITY-ST-ZIP	N MIAMI BCH FL 33179	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LEVY, MARCIA	
STREET ADDRESS	21300 SAN SIMEON WAY, #K-2	
CITY-ST-ZIP	N MIAMI BCH FL 33179	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ASSAEL, MOISES	
STREET ADDRESS	21300 SAN SIMEON WAY, 0-5	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVY, MARCIA	
STREET ADDRESS	21300 SAN SIMEON WAY, K-2	
CITY-ST-ZIP	NORTH MIAMI BEACH, FLORIDA 33179	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALDOVINOS, JO ANN	
STREET ADDRESS	21300 SAN SIMEON WAY P-5	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIONNE BLISSETT	
STREET ADDRESS	21300 SAN SIMEON WAY K-1	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORENO, RAMIRO	
STREET ADDRESS	21300 SAN SIMEON WAY P-1	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 information empowered.

SIGNATURE:  MOISES ASSAEL, PRESIDENT FEBRUARY 14, 2000 (305)654-9201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)



DO NOT WRITE IN THIS SPACE