

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90312 017 ****61.25

DOCUMENT # N30034

1. Entity Name

SAN SIMEON AT THE CALIFORNIA CLUB CONDOMINIUM ASSOCIATION NO. 1, INC.



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
US**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0115762**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ASSAEL, MOISES
21300 SAN SIMEON WAY
0-5
N MIAMI BCH FL 33179**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
HELENICE, REGNER
21300 SAN SIMEON WAY 0-6
N MIAMI BCH FL 33179** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD Helenice Regner ☐ Change ☒ Addition
21300 San Simeon Way #06
North Miami Beach FL 33179**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
CABROL, MICHELLE
21300 SAN SIMPON WAY 0-1
N MIAMI BCH FL 33179** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD MICHELLE CABROL ☐ Change ☒ Addition
21300 SAN SIMEON WAY #06
NORTH MIAMI BEACH FL 33179**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
JONES, MARILU
21300 SAN SIMEON WAY P-2
N MIAMI BCH FL 33179** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD MIJABL FERNANDEZ ☐ Change ☒ Addition
21300 SAN SIMEON WAY P-1
MIAMI FL 33179**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
PIMENTA, ALEXANDRA
21300 SAN SIMEON WAY 0-3
N MIAMI BCH FL 33179** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD MOISES ASSAEL ☐ Change ☒ Addition
21300 SAN SIMEON WAY 0-5
MIAMI FL 33179**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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 of Moises Assael Secretary 1/22/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)