2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # N34795** May 17, 2000 8:00 am Secretary of State BLOSSOMS AT THE HAMMOCKS CONDOMINIUM ASSOCIATION 05-17-2000 90925 032 ****61.25 Mailing Address Principal Place of Business 10000 HAMMOCKS BLVD C/O AERRIS CORP MIAMI FL 33196 P O BOX 960606 MIAMI FL 33296-0606 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0203789 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) **AERRIS CORPORATION** 8003 SW 149 AVE **MIAMI FL 33193** 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. FEE IS \$61,25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. TITLE ☐ Delete TITLE ☐ Addition NAME NAME WOLF, KATHERINE L STREET ADDRESS STREET ADDRESS 10034 HAMMOCKS BLVD. #204 CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33196 TREASURER Change **Addition** TITLE SD Z Delete TITLE RICARDO SOBENIS NAME GOODGER, MARCIA NAME 10022_HAMMOLKS BLVD, # 201-7 STREET ADDRESS STREET ADDRESS 10030 HAMMOCKS BLVD. #208 miami, FL CITY-ST-7IP 33196 CITY-ST-ZIP MIAMI FL 33196 SECRETARY TITLE TD **S** Delete TITLE ☐ Change Addition FERNANDO MUSTIGA 10018 HAMMOLKS BLUO, # 102-5 MIAMI, FL 33196 NAME SCHUMACHER, GARY NAME STREET ADDRESS 10026 HAMMOCKS BLVD., #210 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33196 TITLE **VPD** Delete TITLE ☐ Change ☐ Addition NAME esterripa, Juan NAME STREET ADDRESS STREET ADDRESS 10018 HAMMOCKS BLVD., #210 CITY-ST-ZIP CITY-ST-ZIP Miami FL 33196 TITLE 🗽 ☐ Delete TITI F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME

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 attach

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP