2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State
05-02-2001 90030 041 ****70.00

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DOCUMENT # N34795

1. Entity Name

BLOSSOMS AT THE HAMMOCKS CONDOMINIUM ASSOCIATION

Principal Place of Business	Mailing Address
10000 HAMMOCKS BLVD MIAMI FL 33196 US	C/O AERRIS CORP P O BOX 960606 MIAMI FL 33296-606 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0203789 ☐ Applied For ☐ Not Applicable

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
AERRIS CORPORATION 8003 SW 149 AVE MIAMI FL 33193	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 _____
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WOLF, KATHERINE L 10034 HAMMOCKS BLVD. #204 MIAMI FL 33196	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SOBEINS, RICARDO 10022 HAMMOCKS BLVD #201-7 MIAMI FL 33196	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARIA ACOSTA 10030 HAMMOCKS BLVD. # 104-3 MIAMI, FL 33193 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MUSTIGA, FERNANDO 10018 HAMMOCKS BLVD #102-5 MIAMI FL 33196	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SANDRA MORALES 10018 HAMMOCKS BLVD. # 201-5 MIAMI, FL 33193 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ESTERRIPA, JUAN 10018 HAMMOCKS BLVD., #210 MIAMI FL 33196	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LEYLA CAYCEDO 10026 HAMMOCKS BLVD. #101-6 MIAMI, FL 33193 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JULIAN ROVITO 10018 HAMMOCKS BLVD. # 202-5 MIAMI, FL 33193 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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: S/Katherine Wolf ED 4/18/2001 3057529247
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #