2001 UNIFORM BUSINESS REPORT (UBR) Amended

APPROVED AND FILED

01 AUG 29 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N34795

1. Entity Name
BLOSSOMS AT THE HAMMOCKS CONDOMINUM ASSOCIATION

Principal Place of Business	Mailing Address
10000 HAMMOCKS BLVD MIAMI, FL 33196 USA.	BLOSSOMS AT THE HAMMOCKS # 463 10201 HAMMOCKS BLVD. STE # 153. MIAMI, FL 33196

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

DO NOT WRITE IN THIS SPACE

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: Marlene Leon-Rubido Esq Street Address (P.O. Box Number is Not Acceptable): 8500 W. Flagler St -A-105 City: Miami FL Zip Code: 33144

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.

800004586358--8
-09/13/01--01006--011
**********61.25

SIGNATURE: Marlene Leon-Rubido 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		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	PD. CESPEDES FRANCISCO 10010 HAMMOCKS BLVD # 204 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER ACOSTA MARIA 10030 HAMMOCKS BLVD # 104-3 MIAMI, FL 33196 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER BARREIRO GUIOMAR 10026 HAMMOCKS BLVD # 203-6 MIAMI, FL 33196 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. MORALES. SANDRA 10018 HAMMOCKS BLVD #201-5 MIAMI, FL 33196 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. REYES. EDGAR 10026 HAMMOCKS BLVD # 210-6 MIAMI, FL 33196 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S. CAYCEDO, LEYLA 10026 HAMMOCKS BLVD # 101-6 MIAMI. FL 33196 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S. CORTIÑAS ANA MARIA 10018 HAMMOCKS BLVD. # 202-5 MIAMI, FL 33196. ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. ROVITO JULIAN 10018 HAMMOCKS BLVD # 202-5 MIAMI, FL 33196 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. QUIÑONEZ SONIA 10018 HAMMOCKS BLVD # 101-5 MIAMI, FL 33196. ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition MW

CR2E037 (11/00)

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: Francisco J Cespedes C August 15, 2001 305-219-6430

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #