2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State
05-05-2002 90067 034 ****70.00

DOCUMENT # N93000002408

1. Entity Name

WINDSOR PLAZA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1320 DRIXEL AVNEUE MIAMI BEACH FL 33139 US	WINDSOR PLAZA CONDOMINUIM P.O. BOX 190764 MIAMI BEACH FL 33119 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1320 DREXEL AVE	WINDSOR PLAZA CONDOMINIUM
Suite, Apt. #, etc.	Suite, Apt. #, etc. C/O ALEX OPRZ / P.O. BOX 190764
City & State MIAMI BEACH FL	City & State MIAMI BEACH, FL
Zip: 33139 Country: U.S.A.	Zip: 33119 Country: U.S.A.

4. FEI Number: 65-0567265 ☐ 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
RASPAN, MONICA 8819 EMERSON AVE SURFSIDE FL 33154	Name: MONICA RASPANTI Street Address (P.O. Box Number is Not Acceptable): 8819 EMERSON AVE. City: SURFSIDE FL Zip Code: 33154

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: Monica S Raspanti 3.15.02

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 KAVANAUGH, CHRIS 14405 SOUTH DADE HWY MIAMI FL 33176	☑ Delete	PD MONICA RASPANTI 8819 EMERSON AVE. SURFSIDE, FL 33154	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD AYAN, NELSON 1671 SW 15TH STREET MIAMI FL 33145	☑ Delete	TD PAL STOCK 1320 DREXEL # 200 MIAMI BEACH, FL 33139	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD RASPANTI, MONICA 8819 EMERSON AVENUE SURFSIDE FL 33154	☑ Delete	SD ALICIA GRAHAM 1590 E. GOLFVIEW DR. PEMBROKE PINES, FL 33036	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NELSON, AYAN 1671 SW 15TH ST. MIAMI FL 33145	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MORENO, JADRO 1320 DREXEL AVENUE #36 MIAMI BEACH FL 33139	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRAHAM, ALICIA 1590 E GOLFVIEW DR PEMBROKE PINES FL 33036	☑ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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 RECORDED 3.15.02 (305)868-5362

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