

2000 UNIFORM BUSINESS REPORT (UBR)

10-13-00

DOCUMENT # N95000002765

1. Entity Name

WEST 74TH STREET II CONDOMINIUM ASSOCIATION, INC

FILED

00 JUN 13 AM 9:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

6/13/00 90003/024 \$601.25

4. FEI Number 65-0911942 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

Name PEREZ, LAURA

Street Address (P.O. Box Number is Not Acceptable)
2359 W 74 th St # 104

City HIALEAH

FL Zip Code 33016

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 *Laura Perez*

05/22/2000

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 DP
NAME BUSTAMANTE, RICARDO
STREET ADDRESS 2351 W. 74TH ST. #104
CITY-ST-ZIP HIALEAH FL 33016 ☐ Delete

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

TITLE DVP
NAME PEREZ, ERIC
STREET ADDRESS 2359 W. 74TH ST #101
CITY-ST-ZIP HIALEAH FL 33016 ☐ Delete

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

TITLE DT
NAME PEREZ, LAURA
STREET ADDRESS 2359 W. 74TH ST. #104
CITY-ST-ZIP HIALEAH FL 33016 ☐ Delete

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

TITLE DS
NAME CASTILLO, ELIZABETH
STREET ADDRESS 2355 W 74TH ST #105
CITY-ST-ZIP HIALEAH FL 33016 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

Laura Perez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/22/2000

Date

(305) 823-1201

Daytime Phone #

CR2E037 (9/99)

6/16