

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003558

1. Entity Name

VILLA REAL CONDOMINIUM NO. 2 ASSOCIATION, INC.

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90075 042 ****61.25

Principal Place of Business

11030 NORTH KENDALL
SUITE 100
MIAMI FL 33176

Mailing Address

C/O JR GONZALEZ & ASSOCIATES
2160 SW 137 PLACE
MIAMI FL 33175-1080

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

65-0693812

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

GONZALEZ, JESUS R
2160 SW 137 PLACE
MIAMI FL 33173

Name JESUS R. GONZALEZ

Street Address (P.O. Box Number is Not Acceptable)
11936 SW 8TH ST.

City MIAMI FL Zip Code 33184

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 ☐ Delete
NAME **D**
STREET ADDRESS **MONTUNO, LUIS**
CITY-ST-ZIP **1132 NW 124 PLACE**
MIAMI FL 33182

TITLE ☒ Change ☐ Addition
NAME **T**
STREET ADDRESS **LUIS MONTANO**
CITY-ST-ZIP **1132 NW 124 PLACE**
MIAMI, FL 33182

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **GONZALEZ, ADALGISA**
CITY-ST-ZIP **1124 NW 124 PLACE**
MIAMI FL 33182

TITLE ☒ Change ☐ Addition
NAME **S**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **TD**
STREET ADDRESS **DELCASTILLO, ANA LOPEZ**
CITY-ST-ZIP **1184 NW 124 PLACE, #104**
MIAMI FL 33182

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **GARCIA, LUIS R**
CITY-ST-ZIP **1151 NW 124 PLACE, #104**
MIAMI FL 33182

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **D**
STREET ADDRESS **ISIDRO RUEDA**
CITY-ST-ZIP **1128 NW 124 PLACE #102**
MIAMI, FL 33182

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)(j), 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 or other like empowered.

SIGNATURE: SIG. ADALGISA GONZALEZ R. GARCIA 5/3/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #