2000 UNIFORM BUSINESS REPORT (UBR)

2/1

FILED
May 15, 2000 8:00 am
Secretary of State
02-14-2000 90176 048 ****61.25

DOCUMENT # N97000002311

1. Entity Name

THE JASMINE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2601 SOUTH BAYSHORE DRIVE SUITE PH 1-A MIAMI FL 3333	2601 SOUTH BAYSHORE DRIVE SUITE PH 1-A MIAMI FL 33133-5417

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2615-Collins Ave	Sy-Lo Ent Corp.
Suite, Apt. #, etc.	Suite, Apt. #, etc. PO BOX 557967
City & State Miami Beach, FL	City & State MIAMI - FL
Zip 33140 Country USA	Zip 33255 Country USA

4. FEI Number 65-0777259 ☐ 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
NARANJO, JAVIER J 2001 S BAYSHORE DRIVE PH 1-A COCONUT GROVE FL 33133	Name JASMINE CONDO C/O Street Address (P.O. Box Number is Not Acceptable) SY-LO ENTERPRISES 130 MADEIRA AVE City CORAL GABLES FL Zip Code 33134

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 Emma M. Lopez EMMA M. Lopez - Prop Mgr. 2-7-00
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 NARANJO, JOSE J 2601 S BAYSHORE DR # PH 1-A MIAMI FL 33133	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NARANJO, JAZMIN 2601 S BAYSHORE DR # PH 1-A MIAMI FL 33133	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD HERNANDEZ, HUMBERTO 13998 S.W. 159TH TERRACE MIAMI FL 33137	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT MELCHIOR BALTAZAR 2615 Collins Ave #32 MIAMI BEACH, FL 33139 ☐ Change ☑ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER FULVIA VERDE 2615 Collins Ave #6 MIAMI BEACH, FL 33139 ☐ Change ☑ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY JOSE GARCIA 2615 Collins Ave #3C MIAMI BEACH, FL 33139 ☐ Change ☑ Addition D

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 REQUIRED 2/7/00 3054460333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #