

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000002455

1. Entity Name

TAMIAMI OFFICE CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 12, 2002 8:00 am
Secretary of State

03-12-2002 90274 047 ****70.00

Principal Place of Business

3663 SW 8TH STREET
MIAMI FL 33135
US

Mailing Address

AATN: SANTIAGO GRANJA
P.O. BOX 441900
MIAMI FL 33144
US

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

65-0826341

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TORRES DE NAVARRA, CARLOS
3663 SW 8TH STREET
MIAMI FL 33135

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

TITLE PD
NAME SANTIAGO, GRANJA
STREET ADDRESS 3663 S.W. 8TH ST.
CITY-ST-ZIP MIAMI FL 33135 ☐ Delete

TITLE VD
NAME TORRES DE NAVARRA, CARLOS
STREET ADDRESS 3663 SW 8TH ST., PENTHOUSE
CITY-ST-ZIP MIAMI FL 33135 ☐ Delete

TITLE SD
NAME VALLS, FELIPE A SR
STREET ADDRESS 3663 SW 8TH ST., PENTHOUSE
CITY-ST-ZIP MIAMI FL 33135 ☐ Delete

TITLE TD
NAME ARJONA, GUILLERMO
STREET ADDRESS 3663 S.W. 8TH ST.
CITY-ST-ZIP MIAMI FL 33135 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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:

Santiago Granja

2/27/02 305-648-8835

CR2E037 (9/01)