

2002 UNIFORM BUSINESS REPORT (UBR)

2/6

FILED
Apr 21, 2002 8:00 am
Secretary of State

02-06-2002 90031 036 ****61.25

DOCUMENT # N97000006360

1. Entity Name

SILVERCREST LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

12405 S.W. 130TH STREET
 MIAMI FL 33186

14275 SW 142 AVE
 MIAMI FL 33186

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

65-0809575

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

BRODIE, SIDNEY Z
 7270 N.W. 12TH STREET
 PH-1
 MIAMI FL 33126

Name **SKRLD, Inc. Partner**
 Street Address (P.O. Box Number is Not Acceptable)
201 Alhambra Circle
Suite 1102 (Helio De la Torre)
 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

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 PD **BARBARA, OSCAR** Delete
 STREET ADDRESS **12405 S.W. 130TH STREET**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE NAME PD **ROBERTO JULIA** Change Addition
 STREET ADDRESS **8042 NW 161 TERRACE**
 CITY-ST-ZIP **MIAMI LAKES, FL. 33016**

TITLE NAME VD **GARCIA, CARLOS** Delete
 STREET ADDRESS **12405 S.W. 130TH STREET**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE NAME VPD **Francisco Mingo** Change Addition
 STREET ADDRESS **8032 NW 161 TERRACE**
 CITY-ST-ZIP **MIAMI LAKES, FL. 33016**

TITLE NAME SD **FERNANDEZ, MARTA** Delete
 STREET ADDRESS **12405 S.W. 130TH STREET**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE NAME TD **Mari Sebastian Hernandez** Change Addition
 STREET ADDRESS **15942 NW 79 CT**
 CITY-ST-ZIP **MIAMI LAKES, FL 33016**

TITLE NAME Delete

TITLE NAME SD **George Elso** Change Addition
 STREET ADDRESS **10126 NW 81 CT**
 CITY-ST-ZIP **MIAMI LAKES, FL. 33016**

TITLE NAME Delete

TITLE NAME D **Fernando Gandarillas** Change Addition
 STREET ADDRESS **8120 NW 159 TERRACE**
 CITY-ST-ZIP **MIAMI LAKES, FL. 33016**

TITLE NAME Delete

TITLE NAME 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:

[Signature] **SIGNATURE REQUIRED** *[Signature]* 1/16/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

~~XXXXXXXXXX~~ 24143



DO NOT WRITE IN THIS SPACE