

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 21, 2003 8:00 am**  
**Secretary of State**

01-21-2003 90160 016 \*\*\*\*61.25

**DOCUMENT # N98000004263**

1. Entity Name

**7000 ISLAND BOULEVARD CONDOMINIUM ASSOCIATION, I  
NC.**



Principal Place of Business

**7000 ISLAND BLVD  
AVENTURA FL 33160**

Mailing Address

**7000 ISLAND BLVD  
AVENTURA FL 33160**

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 **65-0859309**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**PISANO, PAT  
7000 ISLAND BLVD  
AVENTURA FL 33160**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, type 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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	GLASS, SIDNEY	7000 ISLAND BLVD	AVENTURA FL 33160	<input type="checkbox"/>						
SD	MARSHALL, M. KEITH	7000 ISLAND BLVD	AVENTURA FL 33160	<input type="checkbox"/>						
DD	ARANA, JOSE	7000 ISLAND BLVD	AVENTURA FL 33160	<input type="checkbox"/>						
TD	GOMEZ, HUMBERTO	7000 ISLAND BLVD	AVENTURA FL 33160	<input type="checkbox"/>						
VD	EVANS, JONATHAN	7000 ISLAND BLVD	AVENTURA FL 33160	<input type="checkbox"/>						
				<input type="checkbox"/>						

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Sidney Glass* 1/13/03 305 931 7716