Feb 03, 2003 8:00 am

FILED

Secretary of State

02-03-2003 90024 022 ****61.25

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

DOCUMENT # **N98000005145**

CADIZ II (CONDOMINIUM ASSOCIA	TION, INC.						
Principal Place of Business 6278 WEST 22ND COURT HIALEAH FL US		Mailing Address 9360 SUNSET DR STE 252 MIAMI FL 33173 US	9360 SUNSET DR STE 252 MIAMI FL 33173		T 	BIER IONI BERN BENI OONI DON	1 EB:8: \$:181 1811 0 1	18 1 6 511 318 1
2. Principal Place of Business		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		λ	CHECK HERE IF MAKI	NG CHANGES	
City & State		City & State	City & State		4. FEI Number 6	5-0871503	<u> </u>	oplied For of Applicable
Zip	Country	Zip	Country		5. Certificate of S	tatus Desired	\$8.75 Add	ditional
	6. Name and Address of Cur	rent Registered Agent	<u>- </u>		7. Name and Add	iress of New Registere		' ——
			Nan	ne NORY				
FEIN AND MELONI			Stre	Street Address (P.O. Box Number is Not Acceptable)				
	ITH STATE ROAD 7 ION FL 33317		50_		VEST MASHTA	DRIVE Suite	<u> </u>	
CANTAI	ION 1 L 33311		Cib		BISCAYNE		an Tip Cod	
			City			F	L Zip Cod	9
	named entity submits this statemer ions of registered agent.	ent in the purpose of changing it	s registered offic	e or register	red agent, or both, in			and accept
SIGNATURE .	Signalary typed or printed name of registered	agent and title if applicable. (NO	TE: Registered Agent s	signature required	d when reinstating)	1/27/0	<u>ع</u>	
क्रिया - अ स्त्र स्य द्राव्य	FILE NOW: FEE IS \$61.25		ampaign Financir Contribution.	ng 🖸	\$5.00 May Be Added to Fees	Make Che Florida Dep	eck Payable artment of S	
10.	OFFICERS ANI	D DIRECTORS	11.		ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	10
TITLE	D DOUGHE DODGE	☐ Delete	TITLE	-			Change	☐ Addition
NAME	TOYENS, ROBERTO	50	NAME OXBUET ADDRE					
STREET ADDRESS City-St-zip	9360 SUNSET DRIVE , STE2! MIAMI FL 33173	02	STREET ADDRE	155				
TITLE	PD	☐ Delete	TITLE			<u> </u>	☐ Change	Addition
NAME	PICON, CARLOS		NAME					
STREET ADDRESS CITY-ST-ZIP	9360 SUNSET DR, STE 252 MIAMI FL 33173		STREET ADDRE	ESS				}
TITLE	D D					·	☐ Change	☐ Addition
NAME	LOPEZ, TERESA		. TITLE NAME				change	
STREET ADDRESS	2828 CORAL WAY STE 435		STREET ADDRE	ss .	-			1
CITY-ST-ZIP	MIAMI FL 33145	,. <u>-</u>	CITY-ST-ZIP					
TITLE	SD	☐ Delete	TITLE				☐ Change	Addition
NAME	MARTINEZ, MERCEDES		NAME					
STREET ADDRESS	9360 SUNSET DR, STE 252		STREET ADDRE	ESS				
CITY-ST-ZIP	MIAMI FL 33173		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE				Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRE	-90				
CITY-ST-ZIP			CITY-ST-ZIP	.00				
TITLE		□ Delete	TITLE		<u> </u>		☐ Change	Addition
	İ							

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

REQUIRED

01-29-03 (305)630-3660