

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

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90086 014 ****61.25

DOCUMENT # N98000005805

1. Entity Name

FLAMINGO COURTS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**8321 NW 7TH STREET, UNIT 101
MIAMI FL 33126**

Mailing Address

**8321 NW 7TH STREET, UNIT 101
MIAMI FL 33126**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0909861**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**HE&F REGISTERED AGENT CORP.
2601 S. BAYSHORE DR., SUITE 600
MIAMI FL 33133**

7. Name and Address of New Registered Agent

Name

Furia Law Firm

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

800 Brickell Ave, #1105

City

miami

FL

Zip Code

33131

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

Arthur J. Furia

ARTHUR J. FURIA

1-7-03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **ACOSTA, MARIA E**
STREET ADDRESS **8320 NW 8TH STREET, UNIT 103**
CITY-ST-ZIP **MIAMI FL 33126**

TITLE **VD** ☐ Delete
NAME **DIAZ, E. LILIANA**
STREET ADDRESS **8321 NW 7TH STREET, UNIT 101**
CITY-ST-ZIP **MIAMI FL 33126**

TITLE **STD** ☐ Delete
NAME **AZARLOZA, ANNIE**
STREET ADDRESS **8321 NW 7TH STREET, UNIT 101**
CITY-ST-ZIP **MIAMI FL 33126**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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:

Annie Azarloza

1-7-03

305-720-6920

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)