

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000006844

1. Entity Name

NIMA COMMERCE PARK CONDOMINIUM ASSOCIATION, INC.

FILED

01 SEP 24 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O NIMA PROPERTIES 2899 WEST 2 AVENUE HIALEAH FL 33010		Mailing Address C/O NIMA PROPERTIES 2899 WEST 2 AVENUE HIALEAH FL 33010	
2. Principal Place of Business OCEANMAR WAREHOUSE Suite, Apt. #, etc.		3. Mailing Address 10221 EAST BROADVIEW DRIVE Suite, Apt. #, etc. Bay Harbor Fl. 33154	
City & State		City & State	
Zip	Country	Zip	Country
	USA		USA
4. FEI Number		Applied For	
65-0890475		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	
VENTURA, NILO 2899 WEST 2 AVENUE HIALEAH FL 33010		Name: Oceanmar Warehouse Inc. Street Address (P.O. Box Number is Not Acceptable) 10221 East Broadview Drive City: Bay Harbor FL Zip Code: 33154	
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:		DATE: 4-24-01	
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	D	TITLE	☐ Change ☒ Addition
NAME	VENTURA, NILO JR	NAME	MARTY CAPRARIOS JR.
STREET ADDRESS	2899 WEST 2 AVENUE	STREET ADDRESS	10221 EAST BROADVIEW DRIVE
CITY-ST-ZIP	HIALEAH FL 33010	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☒ Addition
NAME	VENTURA, HECTOR	NAME	PATRICIA CAPARROS
STREET ADDRESS	2899 WEST 2 AVENUE	STREET ADDRESS	10221 E. BROADVIEW DR.
CITY-ST-ZIP	HIALEAH FL 33010	CITY-ST-ZIP	BAY HARBOR FL 33154
TITLE	D	TITLE	☐ Change ☒ Addition
NAME	QUINTERO, MANUEL	NAME	MARTIN CAPARROS SR.
STREET ADDRESS	2899 WEST 2 AVENUE	STREET ADDRESS	10221 E. BROADVIEW DRIVE
CITY-ST-ZIP	HIALEAH FL 33010	CITY-ST-ZIP	BAY HARBOR, FL 33154
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	LOPEZ, JOSEPH M	NAME	
STREET ADDRESS	2899 WEST 2 AVENUE	STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33010	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	LS
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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)(f), 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:		DATE: 4-24-01	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

0032208

CR2E037 (10/00)