

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000001288

1. Entity Name

ARCADIA HOUSE CONDOMINIUM PROPERTY OWNERS CONDOM

FILED
Mar 07, 2001 8:00 am
Secretary of State

02-08-2001 90042 048 ****61.25

Principal Place of Business
650 PENNSYLVANIA AVENUE
MIAMI BEACH FL 33139

Mailing Address
650 PENNSYLVANIA AVENUE
MIAMI BEACH FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0674266

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DE LA FUENTE, ANDREW ESQ
420 LINCOLN ROAD SUITE 512
MIAMI BEACH FL 33139

Name Douglas Stratton, Esq.

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

407 Lincoln Road

Miami Beach, FL 33139

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.

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 PD
NAME MARTELL, JULIO ☒ Delete
STREET ADDRESS 650 PENNSYLVANIA AVENUE
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE PD ☒ Change ☐ Addition
NAME William Tonelli
STREET ADDRESS 650 Pennsylvania Ave.
CITY-ST-ZIP Miami Beach, FL 33139

TITLE SD ☐ Delete
NAME ARENCIBIA, JUAN
STREET ADDRESS 650 PENNSYLVANIA AVENUE
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE SD ☐ Change ☐ Addition
NAME Arencibia Juan
STREET ADDRESS 650 Pennsylvania Ave.
CITY-ST-ZIP Miami Beach, FL 33139

TITLE CD ☐ Delete
NAME GIANONE, LOUIS
STREET ADDRESS 650 PENNSYLVANIA AVENUE
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE CD ☐ Change ☐ Addition
NAME Giannone, Louis
STREET ADDRESS 640 Pennsylvania Ave.
CITY-ST-ZIP Miami Beach, FL 33139

TITLE S ☐ Delete
NAME WHITE, DOROTHY
STREET ADDRESS 640 PENNSYLVANIA AVE.
CITY-ST-ZIP MIAMI FL 33139

TITLE S ☐ Change ☐ Addition
NAME White, Dorothy
STREET ADDRESS 640 Pennsylvania Ave.
CITY-ST-ZIP Miami Beach, FL 33139

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)