

**FILED**  
**Jul 15, 2002 8:00 am**  
**Secretary of State**

07-15-2002 90184 038 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P01000037275**

1. Entity Name

**SUN COAST VILLAGE ALF, INC.**

**DO NOT WRITE IN THIS SPACE**

**B0128183**

2. Principal Place of Business

**12785 SW 49 TERR.**

Suite, Apt. #, etc.

3. Mailing Address

**12785 SW 49 TERR.**

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**MIAMI, FL**

City & State

**MIAMI, FL**

4. FEI Number

**65-0781873**

Applied For

Not Applicable

Zip

**33175**

Country

**USA**

Zip

**33175**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**SARA MOREJON**

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

**12785 SW 49 TERRACE**

City

**MIAMI**

FL

Zip Code

**33175**

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

*S. Morejon*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**PRES. SEC. TREASURER**  
**SARA MOREJON**  
**12785 SW 49 TERR.**  
**MIAMI, FL 33175**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

**DO NOT WRITE**  
**IN THIS SPACE**

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*S. Morejon* **Sara Morejon**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

CR2E034B (12/01)

Attachment  
80128183

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

July 5, 2002

Sun Coast Village ALF, Inc.  
12785 SW 49<sup>th</sup> Terrace  
Miami, FL 33175

Re: Sun Coast Village ALF, Inc. P01000037275

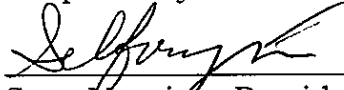
To Whom It May Concern:

We want to inform you that in the filing of the UBR for the above noted corporation we made a typographical error. We purchased this business from someone else and because of the reputation of the business we renamed it with a similar name and incorporated with that name.

When we filed the 2002 UBR one of our staff inadvertently used the document number of the other corporation (Sun Coast Village Inc.). Since we had not received the original UBR for 2002 we used a blank form and this error occurred.

We are returning the original check along with a correctly completed UBR in the hope you understand our situation and accept the filing as corrected.

Respectfully Yours

  
\_\_\_\_\_  
Sara Morejon, President

Attachment off P01000037275  
B0128183

# State of Florida



## Department of State

I certify from the records of this office that SUN COAST VILLAGE ALF, INC. is a corporation organized under the laws of the State of Florida, filed on April 12, 2001.

The document number of this corporation is P01000037275.

I further certify that said corporation has paid all fees due this office through December 31, 2001, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code, 501A00021874-041201-P01000037275-1/1, noted below.

Given under my hand and the  
Great Seal of the State of Florida,  
at Tallahassee, the Capital, this the  
Twelfth day of April, 2001

Authentication Code: 501A00021874-041201-P01000037275-1/1



CR2EO22 (1-99)

*Katherine Harris*

Katherine Harris  
Secretary of State



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 29, 2002

SUN COAST VILLAGE INC.  
12785 S.W. 49TH TERRACE  
MIAMI, FL 33175

SUBJECT: SUN COAST VILLAGE INC.  
Ref. Number: P97000081465

We have received your document for SUN COAST VILLAGE INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2001 corporate annual report/uniform business report form. To reinstate, the corporation must submit a completed reinstatement application/annual report/uniform business report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$600.00 reinstatement fee, \$61.25 filing fee per year for the years 2001 through the current year, \$88.75 corporate supplemental fee for 1992 and every year thereafter.

Therefore, the total amount due to reinstate the corporation is \$900.00. Add an additional \$8.75 for each certificate of status requested.

The total amount due includes the 2002 Annual Report/Uniform Business Report and Supplemental Fee.

List the street address of each officer/director listed on the report or on an attachment.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner  
Senior Section Administrator

- Letter Number: 302A00034571

Attachment  
B0128183  
P970000037275