

FILED  
Apr 30, 2003 8:00 am  
Secretary of State

04-30-2003 90328 013 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000059817

1. Entity Name  
**COCONUT GROVE REDEVELOPMENT COMPANY, INC.**



Principal Place of Business  
9370 SUNSET DRIVE  
STE A-202  
MIAMI, FL 33173

Mailing Address  
9370 SUNSET DRIVE  
STE A-202  
MIAMI, FL 33173

11030338



2. Principal Place of Business

2000 PONCE DE LEON BLVD  
Suite, Apt. #, etc.  
6 FLOOR

3. Mailing Address

2000 PONCE DE LEON BLVD  
Suite, Apt. #, etc.  
6 FLOOR

☒ CHECK HERE IF MAKING CHANGES

City & State

CORAL GABLES, FL

City & State

CORAL GABLES, FL

4. FEI Number

65-1146640

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

Zip

33134

Country

DATE USA

Zip

33134

Country

USA

6. Name and Address of Current Registered Agent

CUMMINS, JEFFREY DREW  
9696 NO. KENDALL DRIVE, STE 202  
MIAMI, FL 33176

7. Name and Address of New Registered Agent

Name

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning.)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	GUERRA, MARTIN	
STREET ADDRESS	9370 SUNSET DR., STE. A-202	
CITY-ST-ZIP	MIAMI, FL 33173	
TITLE	V	<input type="checkbox"/> Delete
NAME	GUERRA, JUDITH	
STREET ADDRESS	9370 SUNSET DR., STE. A-202	
CITY-ST-ZIP	MIAMI, FL 33173	
TITLE	S	<input type="checkbox"/> Delete
NAME	CUMMINS, PATRICIA	
STREET ADDRESS	9666 N. KENDALL DR., STE. 202	
CITY-ST-ZIP	MIAMI, FL 33176	
TITLE	T	<input type="checkbox"/> Delete
NAME	CUMMINS, JEFFREY DREW	
STREET ADDRESS	966 N. KENDALL DR., STE. 202	
CITY-ST-ZIP	MIAMI, FL 33176	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUERRA, MARTIN	
STREET ADDRESS	2000 PONCE DE LEON BLVD 6 FLOOR	
CITY-ST-ZIP	CORAL GABLES, FL 33134	
TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUERRA, JUDITH	
STREET ADDRESS	2000 PONCE DE LEON BLVD 6 FL	
CITY-ST-ZIP	CORAL GABLES, FL 33134	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(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 607, 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:

*MARTIN GUERRA*  
PRESIDENT  
MARTIN GUERRA, PRESIDENT

4/29/03. 305-300-9056.  
Date Daytime Phone

CR2E034 (10/02)