2002 UNIFORM BUSINESS REPORT (UBR)

May 30, 2002 8:00 am Secretary of State P01000078651 **DOCUMENT#** 04-18-2002 90340 046 ***150.00 1. Entity Name ALEXANDER CARRILLO, INC. Principal Place of Business Mailing Address 33145 4611 S. UNIVERSITY DR., STE. 113 4611 S. UNIVERSITY DR., STE. 113 DAVIE FL 33328 DAVIE FL 33328 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 6**5**-1137656 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CARRILLO, ALEXANDER Street Address (P.O. Box Number is Not Acceptable) 4611 S. UNIVERSITY DR., STE. 113 DAVIE FL 33328 City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE (9/01) ☐ Change ☐ Addition CARRILLO, ALEXANDER NAME NAME 320 NW 190TH AVE. STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete DΠF ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME 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

13. 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 shart have the same legal effect as it made under oath; that it 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 Block 12 if changed, or on an attachment with an address, with all other like empoyered.

FILED

Is**r**corporated since 1988



Main Office: 14275 S.W. 142 Avenue
Miami, Florida 33186
Tel (305) 378-0130
Fax (305) 378-0259
Estoppel Dept. Fax (305) 253-4126
Toll Free: 1-800-528-3432

000000000000000000000000000000000000000	
Reply to:	

Memorandum

To: Annual Reports Section

Cc: Board of Directors

From: Ann Campbell

Date: May 20, 2002

Re: Racquet Club Village Apartments at Bonaventure 1 West

Attached, please find a copy of the corrected annual report/uniform business report for the referenced association. As requested, I have corrected the attached to indicate that the officers of the Association are also directors and have placed the letter "D" beside the names and addresses of each director. As you will note from the corrections made, Racquet Club Village Apartments at Bonaventure 1 West has 5 directors.

Should you require additional information, please feel free to contact me

Fax (305) 956-2715