

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91843 003 ***150.00

DOCUMENT # P01000101554

1. Entity Name
PROPERTY MANAGEMENT ASSOCIATES, INC.



Principal Place of Business
18181 N.E. 31ST COURT
SUITE 2410
AVENTURA FL 33131

Mailing Address
18181 N.E. 31ST COURT
SUITE 2410
AVENTURA FL 33131



2. Principal Place of Business
18151 NE 31 COURT

Suite, Apt. #, etc.
Suite 1107

City & State
Aventura, FL

Zip
33160

Country
USA

3. Mailing Address
18151 NE 31 COURT

Suite, Apt. #, etc.
Suite 1107

City & State
Aventura, FL

Zip
33160

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1147623**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RUTECKI, HEATHER A ESQ.
BANK OF AMERICA TOWER, 34TH FLOOR
100 SOUTHEAST 2ND STREET
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name **Ronald Tencer**

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

18151 NE 31st Court, Suite 3400

City **Miami**

FL

Zip Code **33160**

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 **Ronald Tencer**

4/28/03

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

(NOTE: Registered Agent signature required when reinstating)

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 **PTD** ☐ Delete
NAME **TENCER, RONALD J**
STREET ADDRESS **18181 N.E. 31ST COURT**
CITY-ST-ZIP **AVENTURA FL 33131**

TITLE **SVD** ☐ Delete
NAME **PINCUS, KELLY B**
STREET ADDRESS **18181 N.E. 31ST COURT**
CITY-ST-ZIP **AVENTURA FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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 **Ronald Tencer**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03 (305) 460-4150

Date

Daytime Phone #

CR2E034 (10/02)