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

DOCUMENT

P01000117614

Suite, Apt. #, etc.

City & State

Zip

1. Entity Name

Suite, Apt. #, etc.

RIGUEIRO, LISSET

2385 SW 26TH STREET **MIAMI FL 33133**

City & State

Zip

DANIA DEL MAR APARTMENTS, INC.

Country



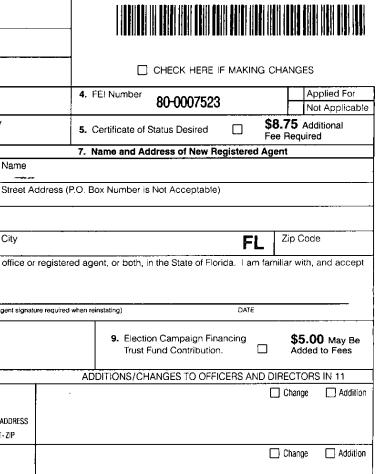
Country

Principal Place of Business Mailing Address 2385 SW 26TH STREET 2385 SW 26TH STREET **MIAMI FL 33133** MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address

6. Name and Address of Current Registered Agent

FILED Jan 09, 2003 8:00 am Secretary of State

01-09-2003 90024 040 ***150.00



			City			FL Zip Code	9
	named entity submits this statement for the purp ions of registered agent.	ose of changing its re	gistered office or	registered age	ent, or both, in the State of Florid	a. I am familiar with, a	and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if app	olicable. (NOTE: R	egistered Agent signate	ure required when rei	nstating)	DATE	
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of State				9. Election Campaign Finan Trust Fund Contribution.	_ +0.0	0 May Be I to Fees
10.	OFFICERS AND DIRECTO	RS	11.	ADI	DITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIGUEIRO, FRANK J 2385 SW 26TH STREET MIAMI FL 33133	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RIGUEIRO, ALEX 2385 SW 26TH STREET MIAMI FL 33133	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
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TITLE NAME STREET ADORESS CITY-ST-ZIP		□ Delete	NAME	l _{imi} ;		☐ Change	Addition

12. Thereby certify that the information supplied with this filling 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: