

FILED
Jun 02, 2003 8:00 am
Secretary of State

05-02-2003 90212 008 ***150.00

5/2

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

DOCUMENT # P02000022612

1. Entity Name
ACP SOUTH FLORIDA II CORP.



Principal Place of Business
701 BRICKELL AVENUE SUITE 3000
MIAMI FL 33131

Mailing Address
701 BRICKELL AVENUE SUITE 3000
MIAMI FL 33131

55045279



2. Principal Place of Business
444 Brickell Avenue

3. Mailing Address
1111 Brickell Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 900

Suite 2500

City & State

City & State

Miami, Florida

Miami, Florida

Zip
33131

Country
USA

Zip
33131

Country
USA

4. FEI Number
35-2160566

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE SUITE 3000
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name
Stuart K. Hoffman, Esq.
Street Address (P.O. Box Number is Not Acceptable)

1111 Brickell Avenue, Suite 2500
City Miami, FL Zip Code 33131

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 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
DP	de Olazarra, Allen C.	444 Brickell Avenue, Suite 900	Miami, Florida 33131		
DVST	Prio Touzet, Rodolfo	444 Brickell Avenue, Suite 900	Miami, Florida 33131		

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 corporations.

SIGNATURE:

By: Allen C. de Olazarra, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)