

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90218 021 ***150.00

DOCUMENT # *P02 0000 44306*

1. Entity Name

Grables at Doral, Corp.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10002 W. Flagler ST

3. Mailing Address

10002 W. Flagler ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Edgardo M. Vasquez

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

4990 NW 102 Avenue Apt 106

City

Miami

FL

Zip Code

33178

**DO NOT WRITE
IN THIS SPACE**

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

E. Vasquez

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

(NOTE: Registered Agent signature required when reconstituting)

1/18/03

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐ \$5.00 May Be

Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*President
Olga L. Botero
4990 NW 102 Avenue Apt 106
Miami, FL 33178*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*Treasurer
Edgardo M. Vasquez
4990 NW 102 Avenue Apt 106
Miami, FL 33178*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Miami, FL 33178

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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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Olga L. Botero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/03

DATE

Daytime Phone #

CR2E034B (12/01)