

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P02000053718**

1. Entity Name
OCEAN TOWER 1604, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 APR 11 PM 12:06

Principal Place of Business
**1200 BRICKELL AVE STE 900
MIAMI FL 33131**

Mailing Address
**1200 BRICKELL AVE STE 900
MIAMI FL 33131**

2. Principal Place of Business
200 S. Biscayne Blvd

3. Mailing Address
200 S. Biscayne Blvd.

Suite, Apt. #, etc.
Suite 4000

Suite, Apt. #, etc.
Suite 4000

City & State
Miami, Florida

City & State
Miami, Florida

Zip Country
33131 USA

Zip Country
33131 USA

4. FEI Number

☒ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**AGI REGISTERED AGENTS INC
1200 BRICKELL AVE STE 900
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name
Peninsula Registered Agents, Inc.
Street Address (P.O. Box Number is Not Acceptable)
**200 S. Biscayne Blvd.
43rd Floor
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.

Peninsula Registered Agents, Inc.
SIGNATURE By: *Debra Palmisano*
Debra Palmisano, Vice President

**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 ☐ Delete
NAME **PSTD**
STREET ADDRESS **APARICIO, GERARDO**
CITY-ST-ZIP **1200 BRICKELL AVE STE 900
MIAMI FL 33131**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **200 S. Biscayne Blvd., #4000**
CITY-ST-ZIP **Miami, Florida 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **300016127059**
CITY-ST-ZIP **04/17/03--01003--004 **150.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Gerardo Aparicio, President

4/2/03

Date

Daytime Price: 1.0