2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2003 8:00 am Secretary of State 04-03-2003 90182 023 ***150.00

DOCUMENT # P02000118325 1. Entity Name PILAR APARTMENTS, INC.				04-03-2003 90182 023 ***150.00	
Principal Place of Business 4677 NW 60TH LANE CORAL SPRINGS FL 33087		Mailing Address 4677 NW 60TH LANE CORAL SPRINGS FL 330	67		
2. Principal F	Place of Business	3. Mailing Address		- I JANIARA IN BENYA KANI BANA BANA NADI NEDI MARI MANI MANI MANI DIN MANI	
Suite. Apt. #, etc.		Suite, Apt. #, etc.		. CHECK HERE IF MAKING CHANGES	
City & Stat	е	City & State		4. FEI Number 37 -144880 (a Not Applied For Not Applicable	7
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	7
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent]_
400440	FOOADDO		Name		-}-
ASCANIO, EDGARDO 4677 NW 60TH LANE			Street Addres	s (P.O. Box Number is Not Acceptable)	
CORAL SI	PRINGS FL 33067				1
_			City	FL Zip Code	
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	s registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	(E: Registered Agent signature requ	dred when reinstating) DATE	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003, Fee will be \$550.00 c Payable to Florida Department o	1 State		9. Election Campaign Financing \$5:00 May Be Trust Fund Contribution: Added to Fees	
°10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	Ι_
TITLE NAME STREET ADDRESS	Fresident Edgardo Ascanio 4677 NW LO LANE	☐ Delete	TITLE NAME STREET ADDRESS	Change Addition	(10/02
CITY-ST-ZIP	coral Springs, FL3	30 <i>6</i> 7 ·	Burni or Tip	`	123
TITLE	istino Orac Awast		CITY-ST-ZIP	<u> </u>	2E034
NAME STREET ADDRESS	vice president. Omelis Ascanio 5000 NW 66th Dr	□ Cuture	TITLE NAME STREET ADDRESS	Change Addition	CR2E034 (10/02)
	Omelis Ascanio	□ Delete	TITLE NAME	Change Addition	CRZE034
STREET ADDRESS	omelis Ascanio 5000 NW 66th Dr Coralsprings, FL	□ Delete	TITLE NAME STREET ADDRESS	Change Addition	CRZE034
STREET ADDRESS CITY-ST-ZIP TITLE	Omelis Ascanio	□ Delete -1VE · 33067 · ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	•	CRZE034
STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	omelis Ascanio 5000 NW 66th Or Coralsprings, FL	□ Delete -1VE · 33067 · ·	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS - CITY-ST-ZIP TITLE NAME STREET ADDRESS	•	-
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STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	omelis Ascanio 5000 NW 66th Or Coralsprings, FL	□ Delete 330(6) □ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Change Addition	-
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	omelis Ascanio 5000 NW 66th Or Coralsprings, FL	Delete 3306) Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS - CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition Change Addition Change Addition	-

2. 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 ampowered 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 STATUS OF PRINTED HAME OF SHOWING OFFICER OF DARRECTOR DESCRIPTION D