2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

P02000122785

1. Entity Name

LARAINE CONDO INC., A FLORIDA CORPORATION



Feb 19, 2003 8:00 am Secretary of State 02-19-2003 90009 028 ***150.00

FILED

Principal Place of Business C/O MURAI WALD BIONDO & MORENO, P.A. 25 S.E. 2ND AVENUE. SUITE 900 MIAMI FL 33131

Mailing Address

C/O MURAI WALD BIONDO & MORENO. P.A. 25 S.E. 2ND AVENUE, SUITE 900

MIAMI FL 33131



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2. Principal Place of Business Take VIIIa One Condominium 723 Crandon Blvd Suite, Apt. #, etc.			3. Mailing Address Lake Villa One Condominium 723 Crandon Blvd			- I KORANTON IN TONIO NIKKI BANK DANK DANK DANK IN IN IN IN INDIA KAN INDIA KAN INDIA KAN INDIA KAN INDIA KAN I					
Unit 3			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & Sta			Unit 305								
	scayne,	и.	City & State	Key Biscayne, FL			4. F	El Number		KX.	Applied For
Zip Country		-		_		ļ				Not Applicable	
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33147	6 Name		33149	<u>US</u> ≉	<u> </u>		<u>Ł.</u> .		. 🗆	Fee Requi	
6. Name and Address of Current Registered Agent					Ness		7. N	ame and Address of New Re	gistere	d Agent	
MILEALV	VAI D RIONE	OO & MORENO, P.A.		Name							
			Street Address			ddress ((P.O. Box Number is Not Acceptable)				
	2ND AVENU	Ł						A Number is Not Acceptable)			
Suite 90	00										
Miami Fl	33131			ŀ	0:-						
·			·		City				F	· Zip Co	
8. The above	named entity	submits this statement for	the purpose of changing its	registered	d office or	registere	ed ager	nt, or both, in the State of Flori	ida La	m fomiliar with	
the obligat	tions of registe	ered agent.		•			ou agu	nt, or boar, in the State of Flori	ua. Tai	m tarnıllar with	i, and accept
SIGNATURE .											
SIGNATURE .	Signature, typed o	or printed name of registered agent an	d title if applicable. (NOT	E: Registered A	Acont singet	ura rominima.					
					- Serie 2/Gillatin	ne required t	wrien rein:	stating)	DATE	:	
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10.		OFFICERS AND D	IRECTORS	11,			ADD	ITIONS/CHANGES TO OFFIC	ERS AN	VD DIRECTOR	RS IN 11
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2. I hereby ce	rtify that the in	nformation supplied with this	s filing does not qualify for t	he evemnt	ion etator	t in Conti		07/07/2 51 14 0			

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 changed, or on an attachment with an apidress, with all other life appowered.

SIGNATURE:

SIGUE A. HIERTA SIGNATURE AND TY

Daytime Phone #