

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000054509

1. Entity Name

CENTURY SERENA LAKES TOWNHOMES, INC.

FILED

Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90053 006 ***150.00

Principal Place of Business

Mailing Address

14505 COMMERCE WAY
#400
MIAMI LAKES FL 33016
US

14505 COMMERCE WAY
#400
MIAMI LAKES FL 33126-1927
US

2. Principal Place of Business

7270 NW 12 Street

3. Mailing Address

7270 NW 12 Street

Suite, Apt. #, etc
Suite 410

Suite, Apt. #, etc
Suite 410

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number 65-0505790

Applied For

Not Applicable

Zip
33126

Country

Zip
33126

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSTON, PATRICE M
14505 COMMERCE WAY
#400
MIAMI LAKES FL 33016

7. Name and Address of New Registered Agent

Name

Keyla Alba Reilly

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

7270 NW 12 Street, Suite 410

City

Miami

FL

Zip Code
33126

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

Keyla Alba Reilly

2/18/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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
AVPS
JOHNSTON, PATRICE M
5901 NW 151ST ST SUITE 120
MIAMI LAKES FL 33014 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WEITZER, HARRY
14505 COMMERCE WAY #400
MIAMI LAKES FL 33016 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
ROSEWATER, JAMES P
5901 NW 151 STREET, SUITE 120
MIAMI LAKES FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
RICE, SHERYL S
14505 COMMERCE WAY #400
MIAMI LAKES FL 33016 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P Luis P. Rabell ☐ Change ☒ Addition
7270 NW 12 Street, Suite 410
Miami, FL 33126

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT Emiliano de la Fuente ☐ Change ☒ Addition
7270 NW 12 Street, Suite 410
Miami, FL 33126

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S Keyla Alba Reilly ☐ Change ☒ Addition
7270 NW 12 Street, Suite 410
Miami, FL 33126

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV Thomas Iglesias ☐ Change ☒ Addition
7270 NW 12 Street, Suite 410
Miami, FL 33126

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

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

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 Block 12 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE:

Keyla Alba Reilly

2/18/00

Date

Daytime Phone #

CR2E034 (9/99)