

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000029137

1. Entity Name

GMN-TIFFANY SQUARE, INC.

FILED
Feb 02, 2000 8:00 am
Secretary of State

02-02-2000 90033 005 ***158.75

Principal Place of Business

Mailing Address

1460 BRICKELL AVE

1460 BRICKELL AVE

SUITE 309

SUITE 309

MIAMI FL 33131

MIAMI FL 33131-3437

2. Principal Place of Business

300 NW 12th AVE

3. Mailing Address

300 NW 12th AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33128

Country

USA

Zip

33128

Country

USA

4. FEI Number

65-0695815

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GERAMON, GONZALO
1460 BRICKELL AVENUE
SUITE 309
MIAMI FL 33131

Name SAL MARTORANO

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

300 NW 12th AVE

City

MIAMI

FL

Zip Code

33128

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

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)

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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 ☐ Delete

PD
NAME DOMINGUEZ, AGUSTIN
STREET ADDRESS 1460 BRICKELL AVE #309
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Delete

VD
NAME SIBLEY, RUSSELL JR.
STREET ADDRESS 1460 BRICKELL AVE. #309
CITY-ST-ZIP MIAMI FL 33131

TITLE ☒ Delete

VD
NAME ANDERSON, EUGENIA
STREET ADDRESS 1460 BRICKELL AVENUE; #309
CITY-ST-ZIP MIAMI FL 33131

TITLE ☒ Delete

T
NAME RAMON, GONZALO D
STREET ADDRESS 1460 BRICKELL AVE., #309
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition

T
NAME SAL MARTORANO
STREET ADDRESS 300 NW 12th AVE.
CITY-ST-ZIP MIAMI, FL 33128

TITLE ☐ Change ☒ Addition

VD
NAME CLAIRE RALEY
STREET ADDRESS 300 NW 12th AVE.
CITY-ST-ZIP MIAMI, FL 33128

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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 like empowered.

SIGNATURE:

SAL MARTORANO

4/27/00

305-324-5505

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)