

2002 UNIFORM BUSINESS REPORT (UBR)

0347904 AV

DOCUMENT # **P96000020606**

1. Entity Name

CAMARGO MANAGEMENT COMPANY

Principal Place of Business

**ONE NORTH CLEMATIS ST., 2ND FLOOR
WEST PALM BEACH FL 33401**

Mailing Address

~~ONE NORTH CLEMATIS ST., 2ND FLOOR
WEST PALM BEACH FL 33401~~
P.O. Box

FILED

02 MAR -1 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 3435

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

33402

Country

FL

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KLOCK, JOSEPH P JR
200 S. BISCAYNE BLVD., 41ST FLOOR
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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 **PT** ☐ Delete
NAME **FANJUL, ALEXANDER**
STREET ADDRESS **ONE NORTH CLEMATIS ST., 2ND FLOOR**
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **SD** ☐ Delete
NAME **KLOCK, JOSEPH P JR**
STREET ADDRESS **200 S. BISCAYNE BLVD., 41ST FLOOR**
CITY-ST-ZIP **MIAMI FL 33131-2398**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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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
NAME **100005073601--5**
STREET ADDRESS **-03/08/02--01065--002**
CITY-ST-ZIP ******600.00 ****150.00**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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)(f), 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:

JOSEPH P. KLOCK, JR., Secretary

2/6/02

Date

305/577-~~7800~~

Daytime Phone #

CR2E034 (9/01)