

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90545 001 *2,850.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000018169

1. Entity Name
OCEANMAR PARK APARTMENTS, INC.



Principal Place of Business: 5779 NW 151 STREET, MIAMI LAKES, FL 33014 US
 Mailing Address: 10221 EAST BROADVIEW DRIVE, BAY HARBOR, FL 33154 US

55041568

2. Principal Place of Business: 4855 Pinetree Dr.
 3. Mailing Address: 4855 Pinetree Dr.

Suite, Apt. #, etc.:
 City & State: *Beach* miami, FL

Zip: 33140 Country: US



CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-0736100
 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CAPARROS, MARTY
 4235 W. 16TH AVENUE, #101
 HIALEAH, FL 33012

7. Name and Address of New Registered Agent
 Name: Martin Caparros
 Street Address (P.O. Box Number Is Not Acceptable): 4855 Pinetree Dr.
 City: miami *Beach* FL Zip Code: 33140

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Martin Caparros* DATE: 5/1/03

FILE NOW!!! FEE IS \$150.00
 After May 1, 2003 Fee will be \$350.00
 Make Check Payable to Florida Department of State
 9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PSD NAME: CAPARROS, MARTY STREET ADDRESS: 10221 EAST BROADVIEW DRIVE CITY-ST-ZIP: BAY HARBOR, FL 33154	<input type="checkbox"/> Delete	TITLE: Martin Caparros NAME: Martin Caparros STREET ADDRESS: 4855 Pinetree Dr. CITY-ST-ZIP: miami, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 10 or Block 11 if changed, or on an attachment with an address, with all other I've empowered.

SIGNATURE: *Martin Caparros* DATE: 5/1/03

CR2E034 (10/02)