

# 2000 UNIFORM BUSINESS REPORT (UBR) ✓

0226511

DOCUMENT # P98000008329

1. Entity Name

REEDY CREEK MITIGATION, INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

00 APR 26 AM 9:19

Principal Place of Business

Mailing Address

2300 CORAL WAY  
SUITE 200  
MIAMI FL 33145

2300 CORAL WAY  
SUITE 200  
MIAMI FL 33145-3511

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0848105

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

FLORIDA ANNUAL REPORT SERVICES INC.  
2300 CORAL WAY  
SUITE 200  
MIAMI FL 33145

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 required or printed name of registered agent and title if applicable

AMADA CANTERA LOPEZ, PRES.

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME LOPEZ-CANTERA, AMADA  
STREET ADDRESS 2300 CORAL WAY  
CITY-ST-ZIP MIAMI FL 33145



Delete

TITLE SD  
NAME LOPEZ-CANTERA, AMADA  
STREET ADDRESS 2300 CORAL WAY  
CITY-ST-ZIP MIAMI, FL 33145



Change



Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

TITLE PD  
NAME LOPEZ-CANTERA, CARLOS C  
STREET ADDRESS 7415 NW 7 STREET  
CITY-ST-ZIP MIAMI, FL 33126



Change



Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Change



Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Change



Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Change



Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

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 of 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 authority empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
CARLOS C. LOPEZ-CANTERA, PRES.

Date

Daytime Phone #

CR2E034 (9/99)