

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2003 8:00 am
Secretary of State

04-24-2003 90208 014 ***150.00

DOCUMENT # P99000065606

1. Entity Name

GOLD COAST CONDOMINIUM MAINTENANCE AND LAWN CARE, INC.



Principal Place of Business
~~2909 VIA VELLARIA STREET~~
~~LAKE WORTH FL 33461~~

Mailing Address
~~2909 VIA VELLARIA STREET~~
~~LAKE WORTH FL 33461~~

2. Principal Place of Business
4676 Kelmar Drive

3. Mailing Address
P. O. Box 18047

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
West Palm Beach, FL

City & State
West Palm Beach

4. FEI Number **65-0936523**

Applied For
Not Applicable

Zip **33415** Country **Palm Beach**

Zip **33416** Country **Palm Beach**

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

6. Name and Address of Current Registered Agent

KARLIK, DIANE L ESO
CAMPBELL AND KARLIK, P.A.
3450 NORTHLAKE BLVD., SUITE 200
PALM BEACH GARDENS FL 33403

7. Name and Address of New Registered Agent

Name **Leonardo A. Roth, Esquire**
Street Address (P.O. Box Number is Not Acceptable)
Roth, Rousseau & Barrach, P.A.
3440 Hollywood Blvd., Suite 360
City **Hollywood, FL** Zip Code **33021**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

TITLE **D** ☒ Delete
NAME **PALOMINO, SILVIO M**
STREET ADDRESS **2909 VIA VELLARIA STREET**
CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE **D** ☒ Delete
NAME **PALOMINO, MARIA E**
STREET ADDRESS **2909 VIA VELLARIA STREET**
CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Director** ☒ Change ☐ Addition
NAME **Rafael C. Blanca**
STREET ADDRESS **4676 Kelmar Drive**
CITY-ST-ZIP **West Palm Beach, FL 33415**

TITLE **Director** ☒ Change ☐ Addition
NAME **Sebastian A. Gordon**
STREET ADDRESS **4676 Kelmar Drive**
CITY-ST-ZIP **West Palm Beach, FL 33415**

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

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

12. 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 10 or Block 11 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: **SEBASTIAN ARIEL GORDON**
SEBASTIAN ARIEL GORDON
VICE PRESIDENT

Date **04/21/2003** 561-379-2281
Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)