

2001 UNIFORM BUSINESS REPORT (UBR)

0148967

DOCUMENT # P99000065632

1. Entity Name
CONTINUACARE PROPERTY CORP.

FILED

01 APR 30 PM 1:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
80 S.W. 8TH STREET
SUITE 2350
MIAMI FL 33130

Mailing Address
80 S.W. 8TH STREET
SUITE 2350
MIAMI FL 33130

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0936642

Applied For
Not Applicable

Zip Country

Zip Country

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

UCC FILING & SEARCH SERVICES, INC.
526 EAST PARK AVE.
STE. 200
TALLAHASSEE FL 32302

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

(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, 2001 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 PTS
NAME ANGEL, SPENCER J
STREET ADDRESS 80 S.W. 8TH STREET, STE. 2350
CITY-ST-ZIP MIAMI FL 33130

TITLE P, VP, T, S
NAME Spencer Angel
STREET ADDRESS 80 SW 8th Street, Suite 2350
CITY-ST-ZIP Miami, FL 33130

TITLE VP
NAME SALAZAR, GUILLERMO
STREET ADDRESS 80 S.W. 8TH STREET, STE. 2350
CITY-ST-ZIP MIAMI FL 33130

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

SPENCER ANGEL

4/27/01

305-3507515

CR2E034 (10/00)