2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# P99000087488

Entity Name: CONDOTEL SERVICES ONE, INC.

Current Principal Place of Business:

2601 S. BAYSHORE DR., PENTH. ONE
MIAMI, FL 33133

New Principal Place of Business:

185 SE 14TH TERRACE
SUITE 102
MIAMI, FL 33131

Current Mailing Address:

2601 S. BAYSHORE DR., PENTH. ONE
MIAMI, FL 33133

New Mailing Address:

185 SE 14TH TERRACE
SUITE 102
MIAMI, FL 33131

FEI Number: 65-0952670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEIBOVITCH, ELLEN M
2601 S. BAYSHORE DR., PENTH. ONE
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

LEIBOVITCH, ELLEN M
2601 S. BAYSHORE DR.
SUITE 600
MIAMI, FL 33133 US

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: _____ 04/30/2002
Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DVP	( ) Delete
Name:	MEDINA, MANUEL D	
Address:	2601 S. BAYSHORE DR., PENTH. ONE	
City-St-Zip:	MIAMI, FL 33133	
Title:	DEVS	( ) Delete
Name:	GOODKIND, BRIAN K	
Address:	2601 S. BAYSHORE DR., PENTH. ONE	
City-St-Zip:	MIAMI, FL 33133	
Title:	D	( ) Delete
Name:	KATZ, MICHAEL L	
Address:	2601 S. BAYSHORE DR., PENTH. ONE	
City-St-Zip:	MIAMI, FL 33133	
Title:	D	( ) Delete
Name:	BIONDI, WILLIAM J	
Address:	2601 S. BAYSHORE DR., PENTH. ONE	
City-St-Zip:	MIAMI, FL 33133	
Title:	DVPT	( ) Delete
Name:	PADRON, IRVING A JR.	
Address:	2601 S. BAYSHORE DR., PENTH. ONE	
City-St-Zip:	MIAMI, FL 33133	
Title:	D	( ) Delete
Name:	JACOBSEN, EDWARD P	
Address:	2601 S. BAYSHORE DR., PENTH. ONE	
City-St-Zip:	MIAMI, FL 33133	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAFAEL O. VILLA D 04/30/2002
Electronic Signature of Signing Officer or Director — Date