

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90351 035 ***150.00

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DOCUMENT # P99000089342

1. Entity Name

CODINA HOLDINGS WESTON, INC.

Principal Place of Business

Mailing Address

**2 ALHAMBRA PLAZA
 PH #2
 CORAL GABLES FL 33134**

**2 ALHAMBRA PLAZA
 PH #2
 CORAL GABLES FL 33134**

2. Principal Place of Business

3. Mailing Address

**355 Alhambra Circle, Suite 900
 Coral Gables, Florida 33134**

**355 Alhambra Circle, Suite 900
 Coral Gables, Florida 33134**



DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number **65-0953319**

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

**BEFELER, HENRY
 CODINA GROUP INC.
 2 ALHAMBRA PLAZA
 CORAL GABLES FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

**355 Alhambra Circle, Suite 900
 Coral Gables, Florida 33134**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|-----------------|-------------------------|-----------------------|---------------------------------|
| CD | CODINA, ARMANDO | 2 ALHAMBRA PLAZA, PH 2 | CORAL GABLES FL 33134 | <input type="checkbox"/> |
| P | GIBSON, O FORD | 2 ALHAMBRA PLAZA, PH #2 | CORAL GABLES FL 33134 | <input type="checkbox"/> |
| VTS | BEFELER, HENRY | 2 ALHAMBRA PLAZA, PH#2 | CORAL GABLES FL 33134 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|-------------------------|--------------------------------|-----------------------------|--|-------------------------------------|
| | | 355 Alhambra Circle, Suite 900 | Coral Gables, Florida 33134 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | 355 Alhambra Circle, Suite 900 | Coral Gables, Florida 33134 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | 355 Alhambra Circle, Suite 900 | Coral Gables, Florida 33134 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | VAS Kolleen O P Cobb | 355 Alhambra Circle, Suite 900 | Coral Gables, Florida 33134 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kolleen O P Cobb

Kolleen O P Cobb

4/9/01

Date

3055202300

Daytime Phone #

CR2E034 (10/00)