2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # \$71113** May 04, 2000 8:00 am Secretary of State 1. Entity Name DORAL RESIDENTIAL PROPERTIES, INC. 05-04-2000 90122 009 ***150.00 Mailing Address Principal Place of Business 601 BRICKELL KEY DRIVE. #705 601 BRICKELL KEY DRIVE. #705 MIAMI FL 33131-2649 MIAMI FL 33131 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEL Number 65-0278229 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DE LA PENA & BAJANDAS, LLP DE LA PENA, VILLANUEVA & BAJANDAS, LLP Street Address (P.O. Box Number is Not Acceptable) **601 BRICKELL KEY DRIVE** 601 BRICKELL KEY DRIVE SUITE 705 **SUITE 705 MIAMI FL 33131** City Zin Code MIAMI 8. The above named entity submits this statement for the purpose of changing its entitle of Florida. LEONCIO E. DE LA PENA Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition D ☐ Delete TITLE Change TITLE CASTILLO, ADDY NAME NAME STREET ADDRESS STREET ADDRESS 7255 NO. OAKMONT DRIVE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33015** ☐ Change ☐ Addition ☐ Delete TITLE GOMEZ, LORENA NAME STREET ADDRESS STREET ADDRESS 7255 NO. OAKMONT DRIVE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33015** ☐ Change Addition ☐ Delete TITLE TITLE BAJANDAS, RICARDO NAME NAME 601 BRICKELL KEY DRIVE, #705 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33131** ☐ Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADORESS

CITY-ST-ZIP

RICARDO BAJANDAS

AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

04/28/00

(305) 377-0809

Change

☐ Addition

Daytime Phone #