

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90144 003 ****61.25

DOCUMENT # 739698

1. Entity Name

COSTA BELLA ASSOCIATION, INC.

Principal Place of Business

**1450 S BRICKELL BAY DRIVE
 MIAMI FL 33131-3612**

Mailing Address

**1450 BRICKEL BAY DR
 OFFICE
 MIAMI FL 33131
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1754406

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

**SKILD INC
 201 ALHAMBRA CIRCLE
 SUITE 1102
 CORAL GABLES FL 33134**

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 X

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** Delete
 NAME **LIANE, HARTINEZ**
 STREET ADDRESS **1450 BRICKELL BAY DR 1501**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE **D** Change Addition
 NAME **Armando Valencia**
 STREET ADDRESS **1450 Brickell Bay Drive #1610**
 CITY-ST-ZIP **Miami, FL 33131**

TITLE **T** Delete
 NAME **EARL, BRENDA L**
 STREET ADDRESS **1450 BRICKEL BAY DR #1212**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DP** Delete
 NAME **PEREZ, JOAQUIN**
 STREET ADDRESS **1450 BRICKEL BAY DR #2003**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **BRISelda, GUERRA**
 STREET ADDRESS **1480 BRICKELL BAY DR 1412**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE **T** Change Addition
 NAME **GRISELDA GUERRA**
 STREET ADDRESS **1450 BRICKELL BAY DRIVE #1412**
 CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **S** Delete
 NAME **BENOTO, DANIEL**
 STREET ADDRESS **1450 BRICKELL BAY DR 311**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 617, 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:

SIGNATURE REQUIRED

2/11/02 (305)373-3100

CR2E037 (9/01)