

2001 UNIFORM BUSINESS REPORT (UBR)

1/22/01

FILED
Feb 22, 2001 8:00 am
Secretary of State

01-22-2001 90037 004 ****61.25

DOCUMENT # 717271

1. Entity Name

LAS BRISAS, ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1939 JEFFERSON STREET
 HOLLYWOOD FL 33020

1939 JEFFERSON STREET
 HOLLYWOOD FL 33020

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2383827

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WOLF, ED
 1939 JEFFERSON
 SUITE 404
 HOLLYWOOD FL 33020

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

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

TITLE	D	MAJMON, MOSHE	<input checked="" type="checkbox"/> Delete
NAME		7334 BLACK OLIVE WAY	<i>not on board</i>
STREET ADDRESS		TAMARAC FL 33321	
CITY-ST-ZIP			
TITLE	P	WOLF, ED	<input type="checkbox"/> Delete
NAME		1939 JEFFERSON STREET	
STREET ADDRESS		HOLLYWOOD FL	
CITY-ST-ZIP			
TITLE	VP	BOJAN, LMA	<input checked="" type="checkbox"/> Delete
NAME		1929 JEFFERSON ST, UNIT 101	
STREET ADDRESS		HOLLYWOOD FL 33020	
CITY-ST-ZIP			
TITLE	D	FOLEY, KATHLEEN	<input checked="" type="checkbox"/> Delete
NAME		1939 JEFFERSON ST	
STREET ADDRESS		HOLLYWOOD FL 33020	
CITY-ST-ZIP			
TITLE	D	CHERRY, KATHLEEN	<input type="checkbox"/> Delete
NAME		1939 JEFFERSON STREET, UNIT 203	
STREET ADDRESS		HOLLYWOOD FL 33020	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Vice President		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wolfgang Berg		
STREET ADDRESS	1505 Tyler St.		
CITY-ST-ZIP	Hollywood, FL 33020		
TITLE	Director / Board member		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Fred Phillips		
STREET ADDRESS	1939 Jefferson St, 101		
CITY-ST-ZIP	Hollywood, FL 33020		
TITLE	Sec/Treas.		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bob Jensen		
STREET ADDRESS	1939 Jefferson St, 204		
CITY-ST-ZIP	Hollywood, FL 33020		
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> 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:

Wolfgang Berg
WOLFGANG BERG, President

1/10/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)