## **2002 UNIFORM BUSINESS REPORT (UBR)**

## FILED Feb 03, 2002 8:00 am **DOCUMENT # 722775 Secretary of State** 1. Entity Name 02-03-2002 90002 046 \*\*\*\*61.25 FICUS GARDENS CONDOMINIUM, INC. Principal Place of Business Mailing Address 9051 W. MC NAB RD. 3530 N.W. 52ND AVENUE LAUDERDALE LAKES FL 33319 TAMARAC FL 33321 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 59-1510665 Not Applicable Zip Country Zip Country \$8.75 Additional П 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CULOTTA, STEVE 8051 W. MCNAB RD. TAMARAC FL 33321 amarac 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. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 $\Box$ Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Gilles Tremblay VPD Change 3530 N.W. 52nd AVE # 505 **VPD** TITLE Delete TITLE zampino, armando NAME NAME andordale Lakos, PL 333 F1 3530 NW 52ND AVE #501 STREET ADDRESS STREET ADDRESS LAUDERDALE LAKES FL 33319 CITY-ST-ZIP CITY-ST-ZIP VPD. 🔀 Delete TITLE TITLE BEINSTOCK, JOSEF NAME NAME N.W. SAND AVE # 403 3530 NW 52ND AVE #,511 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERHILL FL 33319 CITY-ST-7IP. -Addition TITLE ☐ Delete TITLE MILLER, BERTHA NAME NAME 3530 NW-52 AV STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES FL CITY-ST-ZIP ☐ Delete ☐ Change Addition WEINBERG, ELAINE NAME NAME 3530 NW 52 AVENUE #405 STREET ADDRESS STREET ADDRESS

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 Statutes, and that my name appears in Block 10 or Block 11 if Statutes are considered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

SPAIN WINDS TO AT

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

Lauderdale Lakes Fl 33329

HAMEL, LEO

3530 NW 52 AVE #607

LAUDERDALE FL 33319

☐ Delete

☐ Delete

CR2E037 (9/01)

☐ Addition

Addition

Change

☐ Change