

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90746 022 ****61.25

DOCUMENT # 724524

1. Entity Name

HABITAT II CONDOMINIUM, INC.



Principal Place of Business

**5851 NW 21ST STREET
LAUDERHILL FL 33313
US**

Mailing Address

**7100 WEST COMMERCIAL BLVD
SUITE 107
LAUDERHILL FL 33319**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1504769**

Applied For

Not Applicable

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

**AMBASSADOR COUNMINTY MANGEMENT
8051 W. MCNAB RD.
TAMARAC FL 33321**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROBERTS, VERNA	
STREET ADDRESS	5600 NW 22 COURT	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	JONES, LONNIE	
STREET ADDRESS	2110 NW 58 AVENUE	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	WELLER, CAROL	
STREET ADDRESS	8775 N.W. 36TH ST. #108	
CITY-ST-ZIP	SUNRISE FL 33351	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HICKS, SAMUEL	
STREET ADDRESS	5632 NW 21 STREET	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCKENZIE, TURNQUIST	
STREET ADDRESS	2215 N.W. 56TH AVE #3E	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CANCIL, MARVIN	
STREET ADDRESS	2208 N.W. 59TH TERR. 68A	
CITY-ST-ZIP	LAUDERHILL FL 33313	

TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jones, James	
STREET ADDRESS	5915 N.W. 2nd Street #77E	
CITY-ST-ZIP	Lauderhill, FL. 33313	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wells, Janice Annette	
STREET ADDRESS	760 N.W. 17th Street	
CITY-ST-ZIP	Pompano Beach, FL. 33060	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas, Fred	
STREET ADDRESS	4550 N.W. 24th Street	
CITY-ST-ZIP	Lauderhill, FL. 33313	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rai, James	
STREET ADDRESS	4721 N.W. 8th Dr.	
CITY-ST-ZIP	Plantation, FL. 33317	
TITLE	PD	<input checked="" 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:

Blaine Carre **REQUIRE** *Marvin Cancil*

3/2/2003 *954-741-8811*

CR2E037 (10/02)