

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725806

1. Entity Name

JOE RON NORTH CONDOMINIUM, INC.

**FILED**  
**May 04, 2000 8:00 am**  
**Secretary of State**

05-04-2000 90166 048 \*\*\*\*61.25

Principal Place of Business 2633 PIERCE STREET HOLLYWOOD FL 33020	Mailing Address 2633 PIERCE STREET HOLLYWOOD FL 33020-3886
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 202	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1548965	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HORULKO, ALEX  
 2633 PIERCE ST  
 #105  
 HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name: Vincent Juliao  
 Street Address (P.O. Box Number is Not Acceptable): 2633 Pierce Street  
 Unit #202  
 City: Hollywood FL Zip Code: 33020

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: *Vincent Juliao* DATE: 4/9/00  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		
TITLE: P NAME: PEREIRA, JUVENCIO STREET ADDRESS: 2633 PIERCE ST, UNIT 101 CITY-ST-ZIP: HOLLYWOOD, FL 00000 33020	<input checked="" type="checkbox"/> Delete	
TITLE: VP NAME: MACALUSO, RICHARD STREET ADDRESS: 2633 PIERCE ST., #108 CITY-ST-ZIP: HOLLYWOOD, FL 00000	<input checked="" type="checkbox"/> Delete	
TITLE: ST NAME: HORULKO, ALEX STREET ADDRESS: 2633 PIERCE ST, #105 CITY-ST-ZIP: HOLLYWOOD, FL 00000	<input checked="" type="checkbox"/> Delete	
TITLE: D NAME: DELLAPIETRO, GERTRUDE STREET ADDRESS: 2633 PIERCE ST., #104 CITY-ST-ZIP: HOLLYWOOD FL	<input type="checkbox"/> Delete	
TITLE: D NAME: PEREIRA, ANNA STREET ADDRESS: 2633 PIERCE ST., #101 CITY-ST-ZIP: HOLLYWOOD FL	<input checked="" type="checkbox"/> Delete	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE: PD NAME: Vincent Juliao STREET ADDRESS: 2633 Pierce Street #202 CITY-ST-ZIP: Hollywood FL 33020	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: VPD NAME: Mike Szabo STREET ADDRESS: 1501A Arthur St. CITY-ST-ZIP: Hollywood, FL 33020	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: STD NAME: Tanya Kovatchv STREET ADDRESS: 2633 Pierce Street #208 CITY-ST-ZIP: Hollywood, FL 33020	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: NAME: David Meacham STREET ADDRESS: 3215 Van Buren St. CITY-ST-ZIP: Hollywood, FL 33021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *Vincent Juliao* DATE: 4/9/00  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)