

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726487

1. Entity Name

INTERNATIONAL STUDIO APARTMENT ASSOCIATION, INC.

Principal Place of Business

1480 SO. OCEAN BLVD.  
POMPANO BEACH FL 33062

Mailing Address

1480 SO. OCEAN BLVD.  
POMPANO BEACH FL 33062-7375

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

500 NE. Spanish River Blvd.

Suite, Apt. #, etc.

Suite #18

City & State

Boca Raton, Fl.

Zip

33431

Country

USA

4. FEI Number

59-1489547

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BOROWIAK, RAYMOND  
1480 S OCEA BLVD  
POMPANO BCH FL 33062

7. Name and Address of New Registered Agent

Name Ernest W. Willis

Street Address (P.O. Box Number is Not Acceptable)

500 NE. Spanish River Blvd.

Suite #18

City

Boca Raton,

FL

Zip Code  
33431

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.

Ernest W. Willis

4/6/00

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	VP	<input type="checkbox"/> Delete
NAME	WILDING, LORRANE	
STREET ADDRESS	740 S FEDERAL HWY	
CITY-ST-ZIP	POMPANO BCH FL 33062	
TITLE	T	<input type="checkbox"/> Delete
NAME	CAPRESECCO, SHIRLEY	
STREET ADDRESS	1480 S OCEAN BLVD #420	
CITY-ST-ZIP	POMPANO BEACH, FL 00000 33062	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	MOLLER, CONSTANCE	
STREET ADDRESS	55 CEDAR LANE	
CITY-ST-ZIP	FLORENCE NJ 08518	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ARMAN, CRECCO	
STREET ADDRESS	ERMOND'S VILLAGE	
CITY-ST-ZIP	BARDONIA NY 10954	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PICARDI, JERRY	
STREET ADDRESS	1480 S OCEAN BLVD	
CITY-ST-ZIP	POMPANO BEACH, FL 00000	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AI, CRECCO	
STREET ADDRESS	1480 S. Ocean Blvd. #204	
CITY-ST-ZIP	Pompano Beach, FL 33062	
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CONNE MOLLER #304	
STREET ADDRESS	1480 S. Ocean Blvd. Pompano Beach,	
CITY-ST-ZIP	FL, 33062	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Carroll-Paula	
STREET ADDRESS	1481 S. Ocean Blvd. Pompano Beach,	
CITY-ST-ZIP	Pompano Beach, FL 33062 FL #304	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jim Alford	
STREET ADDRESS	1480 S. Ocean Blvd, Pompano Beach,	
CITY-ST-ZIP	FL 33062	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Frank Miller #316	
STREET ADDRESS	1480 S. Ocean Blvd, Pompano Beach, FL 33062	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" 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:

Constance Moller, President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/00

788-5120

Date

Daytime Phone #

FILED  
Jun 09, 2000 8:00 am  
Secretary of State

06-09-2000 90021 050 \*\*\*\*61.25

0000000000



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)