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

DOCUMENT # 726549

1. Entity Name



FILED Apr 14, 2003 8:00 am Secretary of State 04-14-2003 90908 004 ****61.25

OMEGA CONDOMINIUM NO. 8, INC.									
7500 N.W. 17TH STREET 7		Mailing Address 7500 N.W. 17TH STREET PLANTATION FL 33313-2174	_						
2. Principal Place of Business		3. Mailing Address]8 0]10] 01[]] 018]] 018]] 018]] 	 	BII BIBIN IBBI	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			×	CHECK HERE IF MAKING	CHANGES		
City & State		City & State		4.	4. FEI Number 59-1559708		Applied For Not Applicable		
Zip	Country	Country Zip Co		5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6Name and Address of Current	t Registered Agent		7.5	Name and Add	ess of New Registered			
			Name	~ ·^ ·	A ===				
BERGMAN,A.C.,CPA 7515 W. OAKLAND PARK BLVD.			Street A	Street Address (P.d. B) Number is Not Acceptable)					
LAUDERI	HILL FL 33319			+					
•	,		City		· · · · · · ·	FL	Zip Cod	le	
	e named entity submits this statement fi	or the purpose of changing its	registered office or	r registered a	gent, or both, in t	he State of Florida. I am	familiar with,	and accept	
ino opinga.		Eru Karlman				(+0			
SIGNATURE	ERIC KAVEMAN Signature, typed or printed name of registered agent		: Registered Agent signat	ure required when i	reinstating)	200 10, 20 DATE	003	<u> </u>	
		· · · · · · · · · · · · · · · · · · ·							
* * *	FILE NOW: FEE IS \$61,25	9. Election Carr Trust Fund C	npaign Financing		.00 May Be	Make Check			
•		i ilustruila C	Ontribution.	□ A00	ed to Fees	Florida Depar	tment or :	State	
10.	OFFICERS AND DI	RECTORS	11.	ADDI	ITIONS/CHANGE	S TO OFFICERS AND DI	RECTORS IN	I 10	
TITLE	P	Delete	TITLE	PResi			X Change	Addition	
NAME	MASS, HERBERT	•	NAMÉ	ELAIN	e mon	PLAISTR			
STREET ADDRESS CITY-ST-ZIP	7500 NW 17TH ST PLANTATION FL 33313		STREET ADDRESS CITY-ST-ZIP	1500 X	UW 170+	1202			
	VP	\57 0.11			TATION FL	33813	M Change	Addition	
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STREET ADDRESS	7500 NW 17TH ST -		STREET ADDRESS	7500 A	# 45(1 M	205			
CITY-ST-ZIP	PLANTATION FL 33313		-CITY-ST-ZIP-	-PLAN	TATION F	1_33313			
TITLE	S	□ Delete	TITLE	TREASI			☐ Change	Addition	
NAME	WEXLER, BEA		NAME	ERIC	KAIFMAN)			
STREET ADDRESS	7500 NW 17TH ST		STREET ADDRESS	7500	NW 75	r 201		}	
CITY-ST-ZIP	PLANTATION FL 33313	· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP	PLAN	TATION F	1 33313			
TITLE	D SOLDINGER DEAD	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME	GOLDWEITZ, PEARL 7500 NW 17TH ST		NAME					}	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
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	PLANTATION FL 33313	Mr. III	TITL C						
TITLE	TD	. ▶ Delete	TITLE NAME	UKE P	ROSIDENT CASTON	4 刈り	C hange	AT A COMMON	
] · = =	Delete	TITLE NAME STREET ADDRESS	OKE PI CHRIS	CASTELL NW 178T :	4N0 #101	⊠ Change	231700000	
TITLE NAME	TD RUBENFAER, BENNY	∑ Delete	NAME	UKE PI CHRIS 7500 I PLAN	CASTELL NW17ST - HTION FL	4ND #101 33313	⊠ Change	J 700000	
TITLE NAME STREET ADDRESS	TD RUBENFAER, BENNY 7500 NW 17TH STREET PLANTATION FL 33313 D	Delete □ Delete	NAME STREET ADORESS	CHRIS 7500 I PLAN	CASTELL NW 175T- HTION FL	4ND #101 33313	☐ Change	Addition	
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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: _

SIGNATURE REQUIRED