

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2001 8:00 am
Secretary of State

02-12-2001 90229 035 ****61.25

DOCUMENT # 728342

1: Entity Name

5300 MAINTENANCE AND MANAGEMENT CORPORATION

Principal Place of Business

Mailing Address

**5300 WASHINGTON STREET
 HOLLYWOOD FL 33021-8046**

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 HOLLYWOOD FL 33021-8046**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1495451

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SCARAMUZZI, VINCENT
 5300 WASHINGTON ST.
 D201
 HOLLYWOOD FL 33021**

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.

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME PD
 STREET ADDRESS SCARAMUZZI, VINCENT
 CITY-ST-ZIP 5300 WASHINGTON ST., D201
 HOLLYWOOD, FL 00000

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME VD
 STREET ADDRESS DE BARTOLO, MICHAEL
 CITY-ST-ZIP 5300 WASHINGTON ST M310
 HOLLYWOOD FL 33021

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME VD
 STREET ADDRESS HARRIS, WILLIAM
 CITY-ST-ZIP 5300 WASHINGTON ST I101
 HOLLYWOOD FL 33021

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME SD
 STREET ADDRESS THOMPSON, DAHLIA
 CITY-ST-ZIP 5300 WASHINGTON ST V409
 HOLLYWOOD FL 33021

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME TD
 STREET ADDRESS LOMUSCIO, MARIE
 CITY-ST-ZIP 5300 WASHINGTON ST K328
 HOLLYWOOD FL 33021

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME 1VPD
 STREET ADDRESS DELL, CATHY
 CITY-ST-ZIP BLDG. K, APT 321 5300 WASHINGTON ST
 HOLLYWOOD FL 33021

TITLE ☐ Change ☐ 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:

Vincent Scaramuzzi
SIGNATURE REQUIRED

2/09/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (10/00)