2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2001 8:00 am
Secretary of State
02-27-2001 90309 022 ****61.25

DOCUMENT # 759953

1. Entity Name

TRIANON EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2600 N.E. 135TH STREET N MIAMI FL 33181	2600 N.E. 135TH STREET N MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

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 59-2103161 ☐ 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
PERRAULT, JACKSON 2600 NE 135 ST #2C NORTH MIAMI FL 33181	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DUBOIS, ROBERT C 2600 NE 135 ST., UNIT 3B N. MIAMI FL 33181-3536	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PERRAULT, JACKSON 2600 NE. 135 STREET, UNIT 2C N. MIAMI FL 33191-3536	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JACKSON, PERRAULT 2600 NE 135 ST., UNIT 2C N MIAMI FL 33131-3537	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DuBois, Robert C. 2600 N.E. 135 STREET, UNIT 3B N. MIAMI FL 33181-5502	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ESTES, LANA G 2600 NE 13 ST #2G N MIAMI FL 33181-3537	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GITTLEMAN, Richard 2600 NE. 135 STREET, UNIT 2J N. MIAMI F 33181-3537	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ESTES, LANA G 2600 NE 135 ST., UNIT 2J N MIAMI FL 33181-3537	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ZAHNISER, CAROL 2600 N.E. 135 STREET, UNIT 3G N. MIAMI FL 33181-3572	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GITTLEMAN, RICHARD 2600 NE 135 ST., UNIT 2J N. MIAMI FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD ZAHNISER, CAROL 2600 NE 135., 3G N. MIAMI FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED _____ 1/19/00 305-947-5287
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #