

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

02-25-2000 90009 015 ****61.25

DOCUMENT # N33307

1. Entity Name

THE CARRIAGE CLUB NORTH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5005 COLLINS AVENUE
 MIAMI, BEACH, FLORIDA 33140

10272

2. Principal Place of Business

5005 COLLINS AVENUE

3. Mailing Address

5005 COLLINS AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI BEACH, FL 33140

City & State

MIAMI BEACH, FL 33140

4. FEI Number

65-0128840

Applied For

Not Applicable

Zip

33140

Country

MIAMI-DADE

Zip

33140

Country

MIAMI-DADE

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

MICHAEL HYMAN, ESQUIRE
 150 WEST FLAGLER STREET, SUITE 2701
 MIAMI, FLORIDA 33130

Name ANTHONY A. KALLICHE, ESQUIRE

Street Address (P.O. Box Number is Not Acceptable)
 BECKER & POLIAROFF, P.A.

5201 BLUE LAGOON DRIVE, SUITE 100

City MIAMI

FL

Zip Code

33126

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

Anthony Kalliche Anthony Kalliche - Becker + Poliaroff PA 4/11/00
 (NOTE: Registered Agent signature required when re-stating)

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	P	☐ Delete
NAME	GUERRA, ELISE	
STREET ADDRESS	5005 COLLINS AVE #1005	
CITY - ST - ZIP	MIAMI, BEACH FL 33140	
TITLE	UP	☐ Delete
NAME	DIAL, HUGO	
STREET ADDRESS	5005 COLLINS AVE #806	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	
TITLE	STD	☐ Delete
NAME	DAVIS, MARTHA	
STREET ADDRESS	5005 COLLINS AVE #1017	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	
TITLE	D	☐ Delete
NAME	FLESCHE, NOAH	
STREET ADDRESS	5005 COLLINS AVE	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	
TITLE	D	☒ Delete
NAME	TERZO, FRANK	
STREET ADDRESS	5005 COLLINS AVE	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☒ Change ☐ Addition
NAME	D	
STREET ADDRESS	5005 COLLINS AVE	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	
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 Statute, 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037(9/99)