

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State

03-22-2000 90021 035 ****61.25

DOCUMENT # N98000006495

1. Entity Name

921 JEFFERSON AVE. ASSOC., INC.

Principal Place of Business

Mailing Address

921 JEFFERSON AVENUE
MIAMI BEACH FL 33139

420 15TH STREET
MIAMI BEACH FL 33139-7950

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

59-2059162

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

KORN, GARY A ESQ.
20803 BISCAYNE BOULEVARD
SUITE 200
AVENTURA FL 33180

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: PD
NAME: SOLMAN, SUSAN
STREET ADDRESS: 921 JEFFERSON AVENUE
CITY-ST-ZIP: MIAMI BEACH FL 33139 Delete

TITLE: Change Addition

TITLE: PD
NAME: GOLDBART, LIONEL
STREET ADDRESS: 921 JEFFERSON AVENUE
CITY-ST-ZIP: MIAMI BEACH FL 33139 Delete

TITLE: Pres/DIR
NAME: LIONEL GOLDBART
STREET ADDRESS: 921 JEFFERSON Ave 4-E
CITY-ST-ZIP: MIAMI BEACH, FL 33139 Change Addition

TITLE: SD
NAME: ARMENTOS, ANGELO
STREET ADDRESS: 921 JEFFERSON AVENUE
CITY-ST-ZIP: MIAMI BEACH FL 33139 Delete

TITLE: Change Addition

TITLE: TD
NAME: FRANGIPANE, GARY
STREET ADDRESS: 921 JEFFERSON AVENUE
CITY-ST-ZIP: MIAMI BEACH FL 33139 Delete

TITLE: Change Addition

TITLE: Delete

TITLE: TD
NAME: George Recarey
STREET ADDRESS: 921 JEFFERSON Ave 2-C
CITY-ST-ZIP: MIAMI BEACH, FL 33139 Change Addition

TITLE: Delete

TITLE: Change Addition

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:

Lionel Goldbart
LIONEL GOLDBART

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-2000

Date

305 332 7878

Daytime Phone #

037 01951