

2002 UNIFORM BUSINESS REPORT (UBR)

0035987

DOCUMENT # 739042

1. Entity Name

NEWPORT "S" CONDOMINIUM ASSOCIATION, INC.

FILED

02 APR 29 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

MELVIN BERKOWITZ
1099 NEWPORT S
DEERFIELD BEACH FL 33442

MELVIN BERKOWITZ
1099 NEWPORT S
DEERFIELD BEACH FL 33442

2. Principal Place of Business

3. Mailing Address

1095 NEWPORT S

1095 NEWPORT S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1095

1095

City & State

City & State

DEERFIELD BEACH FL

DEERFIELD BEACH FL

Zip

Zip

Country

Country

33442

USA

33442

USA

4. FEI Number

59-1936812

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONDOMINIUM OWNERS ORGAZ. CENT. VILLAGE E
3501 WEST DRIVE
DEERFIELD BEACH FL 33442-2085

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

Margot Bloch

MARGOT BLOCH, President

1-11-2002

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	P	<input checked="" type="checkbox"/> Delete
NAME	BERKOWITZ, MELVIN	
STREET ADDRESS	1099 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	1VPD	<input type="checkbox"/> Delete
NAME	BLOCH, MARGOT	
STREET ADDRESS	1095 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	2VPD	<input type="checkbox"/> Delete
NAME	ZOLOT, MARGARET	
STREET ADDRESS	4099 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	PELLATT, REBECCA	
STREET ADDRESS	2099 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	T	<input type="checkbox"/> Delete
NAME	DEMCHAR, JOAN	
STREET ADDRESS	2095 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGOT BLOCH	
STREET ADDRESS	1095 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	1VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIEDA ISAACS	
STREET ADDRESS	1091 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	IRVING KRAVSS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	700005257477--2	
CITY-ST-ZIP	-04/12/02--01058--001	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IRVING KRAVSS	
STREET ADDRESS	3099 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Miley	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BASSOFF, MILDRED	
STREET ADDRESS	2084 NEWPORT S	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	

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:

MARGOT BLOCH, President

1-11-2002

954 428-4017

CR2E037 (9/01)