5/29/2002-90733-033-$61.25-$61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 727101

1. Entity Name

MEADOWBROOK CONDOMINIUM APARTMENTS BUILDING #6, INC.

FILED

02 DEC 12 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
901 N.E. 14 AVE. HALLANDALE FL 33009	901 N.E. 14 AVE. HALLANDALE FL 33009

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 59-1511002 ☐ 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
SMITH, JESSIE 901 N.E. 14TH AVE APT. 508 HALLANDALE FL 33009	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 TIMIS, VASILE 901 NE 14 AVENUE HALLANDALE FL 33009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MONICA ACOSTA 901 NE 14 Ave #106 Hallandale Beach FL 33009	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FRENT, FLAVIUS 901 NE 14TH AVENUE HALLANDALE FL 33009	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ~~PERRON, PATRICIA~~ 901 NE 14TH AVENUE 707 HALLANDALE FL 33009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ELAINE GROSSMANDIES 901 NE 14th Ave #403 HALLANDALE, FL 33009	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MOSI, ANNA 901 NE 14TH AVENUE HALLANDALE FL 33009	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FLUS, ECATERINA 901 NE 14TH AVENUE 101 HALLANDALE FL 33009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP D LUCILLE HARTMAN 901 NE 14th Ave # 105 HALLANDALE, FL 33009	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: X SIGNATURE REQUIRED X June 26, 02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #