## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 723564** 

Entity Name: MEADOWBROOK E.F.G.H., INC.

**Current Principal Place of Business:** 

619 NE 14TH AVENUE

UNIT #305

HALLANDALE BEACH, FL 33009

**Current Mailing Address:** 

619 NE 14TH AVENUE

**UNIT #305** 

HALLANDALE BEACH, FL 33009 US

FEI Number: 59-1461589 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BITTON, JACQUES 610 NE 12TH AVENUE

HALLANDALE BEACH, FL 33009 US

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: JACQUES BITTON 04/24/2020

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** 

Name BITTON, JACQUES Name CHEVRETTE, ANDRE

**610 NE 12 AVENUE** Address 610 NE 12TH AVENUE Address

UNIT #708 UNIT #401

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title **SECRETARY** Title **DIRECTOR** 

Name GARCIA, CARMEN Name KLEINMAN, LARRY

Address 609 NE 14TH AVENUE Address 619 NE 14TH AVENUE

> UNIT #306 APT #706

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR Title DIRECTOR

KICZKO, HALINA YUZDEN, BEKIROVA Name Name

620 NE 12TH AVENUE Address 619 NE 14TH AVENUE Address

> APT #305 APT #702

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

**DIRECTOR** Title **DIRECTOR** Title Name DIMARCO, ROBERT Name FRANK, MARIJA

Address 619 NE 14TH AVENUE Address 609 NE 12TH AVENUE APT #308

**UNIT #705** 

HALLANDALE BEACH FL 33009 HALLANDALE BEACH FL 33009 City-State-Zip: City-State-Zip:

## Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

04/24/2020 SIGNATURE: JACQUES BITTON **PRESIDENT** 

**FILED** Apr 24, 2020

**Secretary of State** 

0374471961CC

## Officer/Director Detail Continued:

Title DIRECTOR

Name BENSIMON, EDMOND

Address 610 NE 12TH AVENUE

UNIT #204

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name HUI, ALICE

Address 620 NE 12TH AVENUE

UNIT #408

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name ULLER, JOHN

Address 610 NE 12TH AVENUE

UNIT #203

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name PASTUI, DANIELA

Address 609 NE 14TH AVENUE

UNIT #503

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name TIMOFTI, EUGENE

Address 620 NE 12TH AVENUE

UNIT #305

City-State-Zip: HALLANDALE BEACH FL 33009