## 2022 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:

VALANCY & REED, P.A. **310 SE 13 STREET** 

FORT LAUDERDALE, FL 33316 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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 25, 2022

Secretary of State

0974772572CC

Officer/Director Detail:

Title **PRESIDENT** Title SECRETARY

Name BITTON, JACQUES Name GARCIA, CARMEN Address

610 NE 12TH AVENUE Address 609 NE 14TH AVENUE **UNIT #708 UNIT #306** 

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

Title Title DIRECTOR

TUZLUCOV, EVGHENIL KICZKO, HALINA Name Name

609 NE 14 AVENUE 619 NE 14TH AVENUE Address Address

**APT #601 APT #305** 

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

Title **DIRECTOR** Title DIRECTOR

SOWERS, YOLANDA Name Name DIMARCO, ROBERT

619 NE 14TH AVENUE 610 NE 12TH AVENUE Address Address

> **APT #407** APT #308

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

Title **TREASURER** Title **DIRECTOR** 

Name FRANK, MARIJA Name BENSIMON, EDMOND Address 609 NE 12TH AVENUE 610 NE 12TH AVENUE Address

UNIT #705 **UNIT #204** 

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

04/25/2022 SIGNATURE: JACQUES BITTON PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR
Name MIHAI, MIORA

Address 619 NE 14TH AVENUE

APT #106

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name BAKER, CARMEN

Address 620 NE 12TH AVENUE

UNIT #506

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name ZUNIGA, SANTOS

Address 610 NE 12TH AVENUE

UNIT #708

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name LUKINA, NATALIA

Address 620 NE 12TH AVENUE

UNIT #607

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name YERIES, MUSIET

Address 620 NE 12TH AVENUE

UNIT #707

City-State-Zip: HALLANDALE BEACH FL 33009