2024 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 723564

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

Current Principal Place of Business:

620 NE 12 TH AVENUE

UNIT #607

HALLANDALE BEACH, FL 33009

Current Mailing Address:

620 NE 12TH AVENUE

UNIT #607

HALLANDALE BEACH, FL 33009 US

FEI Number: 59-1461589 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VALANCY AND REED **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: STEVN VALANCY 04/18/2024

Electronic Signature of Registered Agent

Date

FILED Apr 18, 2024

Secretary of State

3874780588CR

Officer/Director Detail:

PRESIDENT Title Title SECRETARY Name BITTON, JACQUES Name MANUIL, VASIL

Address 610 NE 12TH AVENUE Address 609 NE 14TH AVENUE

UNIT #505

UNIT #708

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

Title Title DIRECTOR

TUZLUCOV, EVGHENII SHOYKHET, NATHAN Name Name

609 NE 14 AVENUE 619 NE 14TH AVENUE Address Address

APT #601 APT #204

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

Title **DIRECTOR** Title **DIRECTOR**

Name DE LA ROSA, CLAUDIA Name ROGATENKO, STEVE

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

APT #605 APT #701

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

Title **TREASURER** Title **DIRECTOR** Name FRANK, MARIJA Name COOK, ALELI

Address 609 NE 12TH AVENUE 610 NE 12TH AVENUE Address

> UNIT #705 **UNIT #704**

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.

04/18/2024 SIGNATURE: JACQUES BITTON PRESIDEN T

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name BARTKOVA, GALINA

Address 619 NE 14TH AVENUE

APT #406

City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name ROBERTSON, PAMELA

Address 620 NE 12TH AVENUE

UNIT #103

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 DELROSSI, DAMON

Address 620 NE 12TH AVENUE

UNIT #301

City-State-Zip: HALLANDALE BEACH FL 33009