## **2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 232957** 

Entity Name: TIFFANY APTS., INC.

**Current Principal Place of Business:** 

1504 S SURF ROAD HOLLYWOOD, FL 33019

**Current Mailing Address:** 

1504 S SURF ROAD

HOLLYWOOD, FL 33019 US

FEI Number: 59-0934571 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLAZER & SACHS PA ONE EMERALD PLACE 3113 STIRLING RD. SUITE 201 FT. LAUDERDALE, FL 33312 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 Mar 06, 2020

**Secretary of State** 

7397681557CC

Officer/Director Detail:

TitlePRESIDENTTitleDIRECTORNameSALOMONE, JESSENameMINER, KEITHAddress1504 S. SURF RDAddress1504 S. SURF RD

APT #49

City-State-Zip: HOLLYWOOD FL 33019 City-State-Zip: HOLLYWOOD FL 33019

APT #61

**TREASURER** 

HOLLYWOOD FL 33021

City-State-Zip:

Title ASST. SECRETARY Title VP

Name MCNAMARA, PATRICIA CLARE Name OSBAND, SANFORD

Address 1504 S. SURF RD Address 3811 FARRAGUT STREET

APT #64

City-State-Zip: HOLLYWOOD FL 33019

Title TREASURER, /SECRETARY

Name KRIZEK, DENNIS

RAddress 1504 S.SURF RD

Address 1504 S. SURF RD APT #21

APT #22 City-State-Zip: HOLLYWOOD FL 33019

City-State-Zip: HOLLYWOOD FL 33019

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DENNIS KRIZEK

Electronic Signature of Signing Officer/Director Detail

03/06/2020 Date