

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 276519

1. Entity Name

MAR-LEN GARDENS "6" CORPORATION

Principal Place of Business

16800 NORTHEAST 14TH AVENUE
MIAMI FL 33162-2836

Mailing Address

16800 NORTHEAST 14TH AVENUE
MIAMI FLA 33162-2836

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

SOUTHERTON, EDITH
16800 NE 14 AVE
N MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	VAIVE, ANDRE	
STREET ADDRESS	16901 N.E. 13TH AVE	
CITY-ST-ZIP	N MIAMI BEACH FL 33162	
TITLE	VP	☒ Delete
NAME	PELTA, CHARLES	
STREET ADDRESS	16901 N.E. 13TH AVE	
CITY-ST-ZIP	N MIAMI BEACH FL 33162	
TITLE	S	☒ Delete
NAME	PICHET, GILLES	
STREET ADDRESS	16901 N.E. 13TH AVE	
CITY-ST-ZIP	N MIAMI BEACH FL 33162	
TITLE	T	☐ Delete
NAME	BERNARD, DORIS	
STREET ADDRESS	16901 N.E. 13TH AVE	
CITY-ST-ZIP	N MIAMI BEACH FL 33162	
TITLE	B	☐ Delete
NAME	BEDARD, LUCILLE	
STREET ADDRESS	16901 N.E. 13TH AVE	
CITY-ST-ZIP	N MIAMI BEACH FL 33162	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	☒ Change ☐ Addition
NAME	Pichet, Gilles	
STREET ADDRESS	16901 NE 13 Ave	
CITY-ST-ZIP	N. Miami Beach, Fla. 33162	
TITLE	S.	☒ Change ☐ Addition
NAME	Ryterski, Max	
STREET ADDRESS	16901 NE 13 Ave	
CITY-ST-ZIP	N. Miami Beach, Fla. 33162	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Andre Vaive
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDRE VAIVE

1/31/2000

305-947-4511

Date

Daytime Phone #

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90070 011 ***150.00

712040



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2060927

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

CR2E034 (9/99)