

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90318 010 ***150.00

FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 283779

1. Entity Name

LEISURE COLONY MANAGEMENT CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1091627

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

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 re-stating)

DATE

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D.	MILLER, LEONARD	700 NW 107 Avenue	MIAMI, FL 33172				
P.	KRASNOFF, JEFFREY P.	760 NW 107 AVE, Ste 300	MIAMI, FL 33172				
V.	RUBIN, SHELLY	760 NW 107 AVE, Ste 300	MIAMI, FL 33172				
T.	JORDAN, MARGARET	760 NW 107 AVE, Ste 300	MIAMI, FL 33172				
DCEO	SAIONTZ, STEVEN J.	760 NW 107 AVE, STE 314					
AC	LIEBERMAN, ARTHUR J.	760 NW 107 AVE, STE 300	MIAMI, FL 33172				

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arthur J. Lieberman

Date

4/11/02

305/485-2000

Daytime Phone #

CR2E034B (12/01)