

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 564020

1. Entity Name

NORDE MANAGEMENT CORP.

**FILED**  
**Apr 27, 2000 8:00 am**  
**Secretary of State**

04-27-2000 90099 025 \*\*\*150.00

Principal Place of Business

Mailing Address

6047 KIMBERLY BLVD.  
SUITE N  
NORTH LAUDERDALE FL 33068

6047 KIMBERLY BLVD.  
SUITE N  
NORTH LAUDERDALE FL 33068-2820

00075631

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1784478

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	STD						
	BERKHEIMER, EDWARD R.	4601 CEDARHILL RD.	COCONUT CREEK FL				
	VD						
	BERKHEIMER, RANDY	7201 SW 1ST ST.	MARGATE FL				
	CEO						
	BERKHEIMER, JERRY D.	5851 HOLMBERG RD S2823	PARKLAND FL				
	VD						
	KONSTEN, JOSEPH M.	1061 HILLSBORO MILS	HILLSBORO BEACH FL				
	D						
	BERKHEIMER, JERRY D.	5851 HOLMBERG RD S2823	PARKLAND FL				

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:

*[Signature]*

4-19-00

754-973-1311

CP2E034 (9/99)