

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90061 009 ****61.25

DOCUMENT # 702357

1. Entity Name

HOLLYWOOD TERRACE APTS, INC.

Principal Place of Business

Mailing Address

2325 GARFIELD ST
 APT 11
 HOLLYWOOD FL 33020-0446
 US

2325 GARFIELD ST
 APT 11
 HOLLYWOOD FL 33020-3446
 US

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

59-2750382

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DE PECOL, MARIO
 2325 GARFIELD
 APT 11
 HOLLYWOOD FL 33020

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 MARIO DE PECOL
 Signature, typed or printed name of registered agent and title if applicable.

Mario De Pecol
 (NOTE: Registered Agent signature required when reinstating)

March 17, 2000
 DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **ST DE PECOL, MARIO**
 STREET ADDRESS **2325 GARFIELD ST #11**
 CITY-ST-ZIP **HOLLYWOOD FL**

TITLE Change Addition
 NAME **P ROGER PROULX**
 STREET ADDRESS **2325 GARFIELD ST 12A**
 CITY-ST-ZIP **Hollywood, FL**

TITLE Delete
 NAME **P D BOYDEN, CLARENCE A.**
 STREET ADDRESS **2325 GARFIELD ST. #15**
 CITY-ST-ZIP **HOLLYWOOD FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D BOUCHARD, STELLA**
 STREET ADDRESS **23225 GARFIELD ST APT 12**
 CITY-ST-ZIP **HOLLYWOOD FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **P D TREMBLAY, ARMAND**
 STREET ADDRESS **2325 GARFIELD ST APT 14**
 CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D CHOUVINARD, RITA**
 STREET ADDRESS **2325 GARFIELD ST**
 CITY-ST-ZIP **HOLLYWOOD FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D MOLL, RUTH**
 STREET ADDRESS **2325 GARFIELD ST APT 9**
 CITY-ST-ZIP **HOLLYWOOD FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIO DE PECOL
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-2000 95
 Date

CR2E037 (9/99)