FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 12, 2001 8:00 am DOCUMENT # 703796 **Secretary of State** 1. Entity Name CORONET TERRACE APARTMENTS INC 03-12-2001 90024 040 ****61.25 Principal Place of Business Mailing Address 2245 PIERCE STREET 2243 PIERCE ST #9 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For -59-2070938 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 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) HAMBLEN, DAVID H 2243 PIERCE ST APT 9 Zip Code HOLLYWOOD FL 33020 FL 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) **FILE NOW:** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State **FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRESIDENT **Addition** TITLE ☐ Delete TITLE _ / Change DAVID HAMBLEN/ 2243 PIERLE ST #9 HAMBLEN, ELIZABETH J NAME NAME STREET ADDRESS 2243 PIERCE ST #9 STREET ADDRESS HOLLYWOOD, FL 33020 CITY-ST-ZIP HOLLYWOOD FL 33020 CITY-ST-ZIP ALAIN PERRON (DIRECTOR) - Change 2243 PLERCE ST. #12 TITLE X Delete TITLE MARCANTOGNINI, GINOVANNINA NAME NAME STREET ADDRESS STREET ADDRESS 2245 PIERCE ST #2 HO1144000D FC-33020 CITY-ST-ZIP HOLLYWOOD FL 33020 CITY-ST-7IP MARY LOGIOS (TREASURER Change Addition TITLE ☐ Delete TITLE 2245 PIERCE ST#4 HOLLY0000, FL 33220 DRAGO, SALVATORE NAME NAME STREET ADDRESS STREET ADDRESS 2243 PIERCE ST #10 CITY-ST-7IP CITY-ST-7IP HOLLYWOOD FL 33020 Ed FARRELL (VICEPRES) Change Addition Delete TITLE TITLE 2243 PERCE ST #7 PERRON, ROGER NAME NAME STREET ADDRESS STREET ADDRESS 2243 PIERCE ST SUITE 12 Holly wood, FL 33020 CITY-ST-78 CITY-ST-7IP HOLLYWOOD FL 33020 DIRECTOR) Addition ☐ Change TITLE TITLE Delete MARY LOGIOS 2245 PIERRE ST #4 LOGIOS, MARY NAME NAME STREET ADDRESS STREET ADDRESS 2245 PIERCE ST #4 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 HOLLY WOOD FL 33020 ☐ Change Maddition Addition TITLE ☐ Delete TITLE DIRÉCTOR) DAVID HAMBLEN ADAMSON, BARBARA NAME NAME 2243 PIERCE ST 19 STREET ADDRESS STREET ADDRESS 2245 PIERCE ST #5 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 33020 HO 11 XCOOUD,

12. I hereby certify that the information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.