


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2004 8:00 am**  
**Secretary of State**

02-17-2004 90038 036 \*\*\*\*61.25

<b>DOCUMENT # 707017</b>			
1. Entity Name <b>BISCAYNE LAKE GARDENS BUILDING "A", CORP., INC.</b>			
Principal Place of Business <b>2800 N.E. 203 STREET APT A6 AVENTURA FL 33180</b>		Mailing Address <b>2800 N.E. 203 STREET APT A6 AVENTURA FL 33180</b>	
2. Principal Place of Business		3. Mailing Address <b>2865 NE 201 Terr</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <b>Aventura FL</b>	
Zip	Country	Zip	Country
<b>33180</b>		<b>33180</b>	<b>FL</b>
6. Name and Address of Current Registered Agent <b>LAVESQUE, MARCEL 2800 N.E. 203 ST #A1 AVENTURA FL 33180</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	



MOORE CR2E037 (11/03)

4. FEI Number **59-1235863** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Marcel Lavesque*  
Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

*Feb 10, 2004*  
DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

## 10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LACAVA, FILIPPO 57 ANDES PLACE STATEN ISLAND NY 10314	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD LAVESQUE, MARCEL 2800 NE 203 ST #A1 AVENTURA FL 33180	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FIELEK, STANLEY 2800 NE 203 ST #AG AVENTURA FL 33180	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCARTELLI, DOMINICK 1202 S MATIN ST SCRANTON PA 18504	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JORTARG, PADLO 2216 E 154 ST BROOKLYN NY 11223	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T-D LAVESQUE, MARCEL 2800 NE 203 ST #A1 Aventura FL 33180	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DAVID, ETZION PO BOX 802201 Aventura FL 33280-2201	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Gregg Bartels 3378 W Country Club DR #1602 Aventura FL 33180	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*PRESIDENT*

*Feb 10, 2004 305-7920123*

Date

Daytime Phone #