

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 710327

1. Entity Name

POINT EAST ONE CONDOMINIUM CORPORATION, INC.

Principal Place of Business

2895 POINT EAST DRIVE
AVENTURA FL 33160

Mailing Address

2895 POINT EAST DRIVE
AVENTURA FL 33160

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

59-1281661

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

Cohen
COHEN, MEL
2950 POINTE EAST DRIVE SUITE E-402
MIAMI FL 33160

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

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 D
NAME WATSON, SIDNEY A
STREET ADDRESS 2930 POINT EAST DRIVE E-212
CITY-ST-ZIP MIAMI FL 33160 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD
NAME COHEN, MEL
STREET ADDRESS 2930 POINT EAST DRIVE SUITE 402
CITY-ST-ZIP AVENTURA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME NUNES, LUIS
STREET ADDRESS 2999 POINT E DR, C-201
CITY-ST-ZIP N MIAMI BCH FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME FRANK, SHIRLEY A
STREET ADDRESS 2980 POINT EAST DRIVE D-307
CITY-ST-ZIP AVENTURA FL 33160 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME SZEKELY, EVA
STREET ADDRESS 2999 POINT EAST DR., C-614
CITY-ST-ZIP AVENTURA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Director
NAME Bougie, Marlene
STREET ADDRESS 2929 Point East Drive A 301
CITY-ST-ZIP Aventura, FL. 33160 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/2001

Date

305-931-3960

Daytime Phone #

FILED
Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90014 035 *****61.25

741915



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

Attachment

Doc. # 710327
741915

POINT EAST ONE

PRESIDENT	MEL COHEN	E-402	935-1198
VICE-PRES	EVA SZEKELY	C-614	937-0837
SECRETARY	SHIRLEY FRANK	D-307	935-7508
TREASURER	SHIRLEY FRANK	D-307	935-7508
DIRECTOR	SIDNEY WATSON	E-212	792-9235
DIRECTOR	MARLENE BOUGIE	A-301	931-8896