

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 711224

1. Entity Name

CRYSTAL COURT MANOR NO. 6 CONDOMINIUM, INC.

FILED
Mar 31, 2000 8:00 am
Secretary of State

03-31-2000 90099 040 ****61.25

Principal Place of Business 1300 N. 12TH CT HOLLYWOOD FL 33019	Mailing Address 1300 N. 12TH CT HOLLYWOOD FL 33019-3235
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2467179		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
Zip	Country	Zip	Country	Name			

6. Name and Address of Current Registered Agent GENOVESE, NICK 1300 N. 12TH COURT #2-B HOLLYWOOD FL 33019				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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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 _____ DATE _____

Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GENOVESE, NICK 1300 N 12TH CT 2B HOLLYWOOD FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mario Strangolagalli 1300 N 12th Ct. 12B Hollywood, FL 33019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AGRESTA, J A 1300 NORTH 12TH COURT, #9A HOLLYWOOD FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GENOVESE, PATRICIA 1300 N 12TH ST CT-2B HOLLYWOOD FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DISTEFANO, GILDA 1300 N 12 CT 1A HOLLYWOOD FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMICCUCI, STELLA 1300 N 12 CT APT 10A HOLLYWOOD FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARRA, WILLIAM 1300 N 12 CT APT 5B HOLLYWOOD FL 33019	TITLE 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)(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: *Patricia Genovese* (954) 925-0106
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)