

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-27-2002 90017 036 ****61.25

DOCUMENT # 716027

1. Entity Name

ROLLING GREEN CONDOMINIUM D, INC.

Principal Place of Business

1401 NE 191 ST.
 N. MIAMI BEACH FL 33179

Mailing Address

1401 NE 191 ST.
 N. MIAMI BEACH FL 33179

23629

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1274688

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

~~PRIETO, BEA~~ **THOMPSON, JITKA**
 1401 NE 191ST ST
 APT # 201
 NO MIAMI BEACH FL 33179

7. Name and Address of New Registered Agent

Name **THOMPSON, JITKA**
 Street Address (P.O. Box Number is Not Acceptable)
1401 NE 191 ST
APT. 201
 City **N. MIAMI BEACH** FL Zip Code **33179**

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 *Jitka M. Thompson, Corp. Secretary*
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

TITLE	P	<input type="checkbox"/> Delete
NAME	WINSTON, SELMA	
STREET ADDRESS	1401 NE 191 ST APT 210	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	
TITLE	D	<input type="checkbox"/> Delete
NAME	SCHLOSBERG, RUTH	
STREET ADDRESS	1401 NE 191 ST APT 218	
CITY-ST-ZIP	N. MIAMI BEACH FL	
TITLE	RECORDING SEC	<input type="checkbox"/> Delete
NAME	NEEDELMAN, GOLDIE	
STREET ADDRESS	1401 NE 191 ST APT 208	
CITY-ST-ZIP	N. MIAMI BEACH FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LAMKAY, MIRIAM	
STREET ADDRESS	1401 NE 191 ST APT 212	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	
TITLE	S	<input type="checkbox"/> Delete
NAME	PRIETO, BEA	
STREET ADDRESS	1401 NE 191 ST APT 117	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	
TITLE	T	<input type="checkbox"/> Delete
NAME	MEWORM, BELLA	
STREET ADDRESS	1401 NE 191 STREET, APT. 405	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MELANIE WENDY	
STREET ADDRESS	1401 NE 191 ST APT. 402	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEAN, AUSTIN	
STREET ADDRESS	1401 NE 191 ST	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33179	
TITLE	CORP. SEC.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMPSON, JITKA	
STREET ADDRESS	1401 NE 191 ST. APT 201	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33179	
TITLE	AYBAR, FREDDIE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AYBAR, FREDDIE	
STREET ADDRESS	1401 NE 191 ST APT. 416	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33179	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(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:

Bella Meworm
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/02
 Date

305-947-6011
 Daytime Phone #

BELLA MELWORM - TREASURER

CR2E037 (9/01)