2000 UNIFORM BUSINESS REPORT (UBR) 8/3 HILED **DOCUMENT # 716972** Aug 21, 2000 8:00 am Secretary of State 1. Entity Name LAKE PARK CONDOMINIUM I. INC. 08-03-2000 90091 020 ****61.25 Principal Place of Business Mailing Address 900 N.E. LAKE PARK DRIVE 900 NE 199TH ST NORTH MIAMI BEACH FLA 33179-3009 NORTH MIAMI BEACH FLA 33179-3009 us 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 59-1274009 Not Applicable Zip Country Zio 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 Street Address (P.O. Box Number is Not Acceptable) PERLMAN, MARK 1820 E HALLANDALE BEACH BLVD HALLANDALE FL 33009 City 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) ... Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. After September 13, 2000 min. will be \$236.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change Addition TITLE TITLE NAME LUBIN, VICTOR NAME STREET ADDRESS 950 NE 199 ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NMB FL TITLE Change Isidro Zanudio Delete LEVINE, MARTIN 950 NE 19959 STREET ADDRESS 922 NE 199TH STREET STREET ADDRESS IMB PL 33179 CITY-ST-ZIF CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 TITI F Addition Delete ALEXANDER: GEORGE NAME NAME STREET ADDRESS 942 N.E. 199 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N MIAMI BEACH, FL 00000 Addition TITLE TITLE Δ Rosenblum, Julia ROSENBLUM, SIDNEY NAME NAME 922 NE 199TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 Addition ☐ Delete PRESI deut TITLE TITLE JACOBS, LEO NAME NAME Les JAcore STREET ADDRESS 920 NE 199TH STREET CITY-ST-7P N MIAMI BCH FL 33179 CITY-ST-70 DIRECTOR Addition TITLE 🗾 Deleta TITLE NAME WOLFSTEIN, JACK NAME HANAN, MAR STREET ADDRESS 920 NE 199TH STREET STREET ADDRESS. City-St-7P CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 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 all address, with all other like empowered. SIGNATURE: