

9/10/01-90048-043-\$61.25-\$61.25

2001 UNIFORM BUSINESS REPORT (UBR)

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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A0084158

DOCUMENT # 716972  
1. Entity Name  
LAKE PARK CONDOMINIUM, INC



Principal Place of Business Mailing Address  
900 N.E. 199 ST. 900 NE 199 ST.  
NORTH MIAMI BEACH. NORTH MIAMI BEACH  
FL 33179-3009 FL 33179-3009

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 59-1274009 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent  
PERLMAN, MARK  
1800 E. HALLANDALE BEACH BLVD.  
HALLANDALE, FL 33009

7. Name and Address of New Registered Agent  
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 After September 12, 2001, min. will be \$236.25  
9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees Make Check Payable to Department of State

Table with 2 columns: 10. OFFICERS AND DIRECTORS, 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. Rows include names like MARTIN R. HANAN, ALEXANDER GEORGE, LEVINE MARTIN, TILLMAN LUNDA, MISSINNE JUNE, HARMON HAROLD.

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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: MARTIN R. HANAN PRES. 9/2/01 305-652-8996  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/01)