## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 724288  1. Entity Name  MEADOWBROOK CONDOMINIUM APARTMENTS BUILDING #3,					FILED Feb 01, 2000 8:00 am Secretary of State				
Principal Place	o of Business	Mailing Address				02-01-2000 9	0045 044	****61.25	
500 N.E. 12TH	AVE APT 202 AVE. APT. #704	500 NE 12TH AVE APT 201 500 N.E. 12TH AVE, APT. #704 HALLANDALE FL 33009-3641 US		DO NOT WRITE IN THIS SPACE					
500 N	lace of Business  I.E. 12th Avenue	3. Mailing Address 500 N.E. 12th Avenue							
Suite, Apt. Apt.		Suite, Apt. #, etc. Apt. 706				DO NOT WE	HITE IN THIS	SPACE	
City & State Hallandale, Fl.		City & State Hallandale, Fl.			4. FEI Number 59-1444755 Applied For Not Applicable				
Zip	Country	Zip	Country		5. Certificate	of Status Desired		\$8.75 Add	litiónal
33009	U.S.A.  6. Name and Address of Current	33009	U.S.A	•		Address of New		Fee Require	<u> </u>
	o. Name and Address of Current	noglatered Agent	Name	.Tu 1	iette A		g.o.	<u>g</u>	
BAER, MARY			Street A 500			er is Not Acceptat venue –	Apt.	503	 
500 N.E. 1 APT 201 HALLAND/	ALE FL 33009		500 City	N.E llan	. 12th	Avenue-	- Apt. FL	503 Zip Cod -   3300	
10.	FILE NOW: FEE IS \$61.25	9. Election Campaign F Trust Fund Contribut		Added	00 May Be d to Fees		Departmen		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD . ANSELMO, JULIA 500 NE 12TH AVE HALLANDALE FL 33009	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, <u>, , , , , , , , , , , , , , , , , , </u>			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS* CITY-ST-ZIP	VP PROSPERI, CESAR 500 NE 12TH AVE. HALLANDALE FL 33009	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	The second second	- <del></del> -	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KLAPPER, BEATRICE 500 NE 12TH AVE HALLANDALE FL 33009	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				, <del>-</del>	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Goldberg, Alvin 500 ne 12th ave	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONCULOV, VALENTINE 500 NE 12 AVE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	JOSEPH 500 NE	12 AVE	22000	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HALLANDALE FL 33009 VP PROSPERI, CESAR 500 N.E. 12TH AVE. HALLANDALE FL 33009	. 🗷 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		HALLAND	ALE, FL	<u> </u>	☐ Change	Addition
12. I hereby of indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, the contract of the contrac	s true and accurate and that my owered to execute this report a	z sionature shall t	have the	same legal effec	ct as it made unde	er oath: that I	am an officer	or director
SIGNAT	URE: SIGNATURE AND TYPED OR B	PRINTED NAME OF SIGNING OFFICER OF	E DIRECTOR			23/2000 Date	)	Daytime Phone #	