NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
02 OCT 24 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 725873 AMENDED

1. Entity Name

OAKLAND SHORES CONDOMINIUM #1, INC.

DO NOT WRITE IN THIS SPACE

300008575473
10/24/02--01095--017 **61.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3127 Oakland Shores Dr.	1920 E. Hallandale Bch Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc. #806
City & State: Oakland Park, FL	City & State: Hallandale, FL
Zip: 33309 Country: USA	Zip: 33009 Country: USA

4. FEI Number 59-1549650 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ERIC M. GLAZER ESQ.

Street Address (P.O. Box Number is Not Acceptable): 1920 E. Hallandale Bch Blvd. #806

City: Hallandale FL Zip Code: 33009

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: 10/16/02

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

FEE IS $61.25 Initial or Amended UBR

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/D	TITLE	
NAME	Pat Zurosky	NAME	
STREET ADDRESS	3105 Oakland Shores Dr. # J-202	STREET ADDRESS	
CITY-ST-ZIP	Oakland Park, FL 33309	CITY-ST-ZIP	
TITLE	VP/D	TITLE	
NAME	Jean Macro	NAME	
STREET ADDRESS	3115 Oakland Shores Dr. #E-105	STREET ADDRESS	
CITY-ST-ZIP	Oakland Park, FL 33309	CITY-ST-ZIP	
TITLE	S/D	TITLE	
NAME	CAREN VIVADO	NAME	
STREET ADDRESS	3125 Oakland Shores Dr	STREET ADDRESS	
CITY-ST-ZIP	Oakland Park, FL 33309	CITY-ST-ZIP	
TITLE	Asst. Sec/D	TITLE	
NAME	Alex Grillo	NAME	
STREET ADDRESS	3129 Oakland Shores Dr.	STREET ADDRESS	
CITY-ST-ZIP	Oakland Park, FL 33309	CITY-ST-ZIP	
TITLE	T/D	TITLE	
NAME	Richard Frazer	NAME	
STREET ADDRESS	3129 Oakland Shores Dr.	STREET ADDRESS	
CITY-ST-ZIP	Oakland Park, FL 33309	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

10/28

CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Jeanne Macro V.P. 10/16/02 (954) 455-1666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #