

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 06, 2009**  
**Secretary of State**

DOCUMENT# 727101

**Entity Name:** MEADOWBROOK CONDOMINIUM APARTMENTS BUILDING #6, INC.**Current Principal Place of Business:**901 N.E. 14 AVE.  
HALLANDALE, FL 33009**New Principal Place of Business:****Current Mailing Address:**3527 NE 168 ST.  
404  
NORTH MIAMI BEACH, FL 33160**New Mailing Address:****FEI Number:** 59-1511002      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MOSI, VALENTIN S  
901 NE 14TH AVE.  
HALLANDALE, FL 33009      US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** P      ( ) Delete  
**Name:** MOSI, VALENTIN  
**Address:** 901 NE 14TH AVE  
**City-St-Zip:** HALLANDALE, FL 33009**Title:** VP/T      ( ) Delete  
**Name:** MURESAN, VIOLETA  
**Address:** 901 NE 14TH AVE  
**City-St-Zip:** HALLANDALE, FL 33009**Title:** S      ( ) Delete  
**Name:** CAROLEO, TONY  
**Address:** 901 NE 14TH AVE  
**City-St-Zip:** HALLANDALE, FL 33009**Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** D      ( ) Change (X) Addition  
**Name:** FLUS, ECATERINA  
**Address:** 901 NE 14TH AVE  
**City-St-Zip:** HALLANDALE, FL 33009**Title:** D      ( ) Change (X) Addition  
**Name:** DERY, NORMAND  
**Address:** 901 NE 14TH AVE  
**City-St-Zip:** HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VALENTIN MOSI

P

05/06/2009

Electronic Signature of Signing Officer or Director

Date