

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -8 PM 3:21

DOCUMENT # 731669 (8)

1. Corporation Name

MEADOWBROOK LAKES CONDOMINIUM APARTMENTS BUILDING
G #3, INC.

Principal Place of Business

Mailing Address

206 SE 10TH ST.
DANIA FL 33004

206 SE 10TH ST.
DANIA FL 33004

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/21/1975

3a. Date of Last Report

04/12/1994

4. FEI Number

59-1603458

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAGAZZU, VENERA C
206 S.E. 10TH ST.
DANIA FL 33004

81 Name
ESTHER BERKOWITZ

82 Street Address (P.O. Box Number is Not Acceptable)
206 S.E. 10th St.

83 DANIA, FL., 33004

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Esther Berkowitz

ESTHER BERKOWITZ

Feb. 13, 1995

(Signature, typed or printed name of registered agent and fee applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	SD
NAME	MAGAZZU, VENERA
STREET ADDRESS	206 SE 10TH ST
CITY - ST - ZIP	DANIA, FL 00000
TITLE	TD
NAME	BERGERON, BRUNO
STREET ADDRESS	206 SE 10TH ST
CITY - ST - ZIP	DANIA, FL 00000
TITLE	AVP
NAME	CLAUDIA, MOREL
STREET ADDRESS	206 SE 10 ST
CITY - ST - ZIP	DANIA, FL 00000
TITLE	P
NAME	CLARKE, PETER
STREET ADDRESS	206 SE 10TH ST
CITY - ST - ZIP	DANIA FL
TITLE	D
NAME	MOREL, G.
STREET ADDRESS	206 SE 10TH ST
CITY - ST - ZIP	DANIA FL
TITLE	VP
NAME	MARTORANO, JOANNE
STREET ADDRESS	206 SE 10TH ST
CITY - ST - ZIP	DANIA FL

1.1 TITLE	SD	☒ Change ☐ Addition
1.2 NAME	BERKOWITZ, ESTHER	
1.3 STREET ADDRESS	206 SE 10th ST	
1.4 CITY - ST - ZIP	DANIA, FL. 00000	
2.1 TITLE	TD	☒ Change ☐ Addition
2.2 NAME	BERKOWITZ, HARRY	
2.3 STREET ADDRESS	206 SE 10th ST	
2.4 CITY - ST - ZIP	DANIA, FL 00000	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	VP	☒ Change ☐ Add
6.2 NAME	CLAUDETTE MOREL	
6.3 STREET ADDRESS	206 SE 10th ST	
6.4 CITY - ST - ZIP	DANIA FL	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(5)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ESTHER BERKOWITZ

Esther Berkowitz

FEB 13, 1995 (305) 923-4580

(Signature and typed or printed name of signing officer or director)

(Date)

(Telephone Number)