

2000 UNIFORM BUSINESS REPORT (UBR)

3

DOCUMENT # 737507

1. Entity Name

MOON BAY CONDOMINIUM, INC.

FILED
Apr 28, 2000 8:00 am
Secretary of State

03-01-2000 90085 002 ****61.25

Principal Place of Business

Mailing Address

104350 OVERSEAS HWY
KEY LARGO FL 33037

8299 CORAL WAY
MIAMI FL 33155-1228



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1797593

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BECKER, POLIAKOFF & STREITFELD, P.A.
5201 BLUE LAGOON DRIVE, SUITE 100
MIAMI FL 33128

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

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
NAME
STREET ADDRESS
CITY-ST-ZIP

P
RODAMMER, EUGENE
104350 OVERSEAS HIGHWAY, UNIT A505
KEY LARGO FL 33037

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
DREAYER, LAURA
8008 MAPLE GROVE
GEORGETOWN IN 47122

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
RAIMUNDEZ, JULIO
41 S.W. 132ND CT.
MIAMI FL 33184

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
KNAPP, PAUL
1930 NW 41 ST
OAKLAND PARK FL 33309

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
ECHENIQUE, LUIS
5900 S.W. 100TH STREET
MIAMI FL 33156

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPD
RODAMMER, EUGENE
RT. 3, BOX 436
BRANCHVILLE NJ 07826

☒ Delete

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
PAUL KNAPP
P.O. BOX 100618
FT LAUDERDALE, FL 33310

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
LUIS ECHENIQUE
5900 SW 100ST
MIAMI FL 33156

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPD
NICE SCHLAIR
10961 SW 106 AVE
MIAMI FL 33176

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TSD
JULIO RAIMUNDEZ
41 SW 132 COURT
MIAMI FL 33184

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/00

305-268-4250

Date

Daytime Phone #

CR2E037 (9/99)