

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738401

1. Entity Name

CORONADO SOCIAL CLUB, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90162 039 ****61.25

Principal Place of Business
20301 WEST COUNTRY CLUB DRIVE
AVENTURA FL 33180
US

Mailing Address
20301 WEST COUNTRY CLUB DRIVE
AVENTURA FL 33180-1675
US

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1721948**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GROSSHANDLER, MAURICE
20335 W COUNTRY CLUB DR
#709
AVENTURA FL 33180

7. Name and Address of New Registered Agent

Name **MILTON SHAPIRO**
Street Address (P.O. Box Number is Not Acceptable)
20301 W COUNTRY CLUB DR # 2029
City **AVENTURA** FL Zip Code **33189**

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
MILTON SHAPIRO

(NOTE: Registered Agent signature required when reinstating)

DATE **4/5/00**

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	P	<input checked="" type="checkbox"/> Delete
NAME	GORDON, GEORGE	
STREET ADDRESS	20335 W COUNTRY CLUB DR, APT 405	
CITY-ST-ZIP	AVENTURA FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ESFORMES, FLORENCE	
STREET ADDRESS	20301 W. COUNTRY CLUB DRIVE	
CITY-ST-ZIP	AVENTURA FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	GROSSHANDLER, MAURICE	
STREET ADDRESS	20335 W COUNTRY CLUB DR #709	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	D	<input type="checkbox"/> Delete
NAME	GORMAN, LEE	
STREET ADDRESS	20379 W. COUNTRY CLUB DRIVE	
CITY-ST-ZIP	AVENTURA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMOLEN, JOSEPH	
STREET ADDRESS	20335 W CONTRY CLUB DR	
CITY-ST-ZIP	AVENTURA FL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	KLOMPUS, HERB	
STREET ADDRESS	20335 W COUNTRY CLUB DR, APT 1801	
CITY-ST-ZIP	AVENTURA FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEL SILVERS	
STREET ADDRESS	20335 W COUNTRY CLUB DR #1509	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JUNE GROSSHANDLER	
STREET ADDRESS	20335 W COUNTRY CLUB DR #709	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JUDI SIMON	
STREET ADDRESS	20335 W COUNTRY CLUB DR #2310	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILTON SHAPIRO	
STREET ADDRESS	20301 W COUNTRY CLUB DR #2029	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARIAN FOX	
STREET ADDRESS	20301 W COUNTRY CLUB DR #1526	
CITY-ST-ZIP	AVENTURA, FL 33180	

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:
MILTON SHAPIRO

DATE **4/5/00**

(305) 935-6653

Daytime Phone #

CR2E037 (9/99)