

2000 UNIFORM BUSINESS REPORT (UBR)

1/27/00-90137-039-\$61.25-\$61.25

DOCUMENT # 741346

1. Entity Name
VENETIAN PARK CONDOMINIUM V ASSOCIATION, INC.

FILED
00 MAR 13 AM 10: 58
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA 7612



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
 2216 NE 7TH ST 2216 NE 7TH ST
 HALLANDALE FL 33009 HALLANDALE FL 33009-2804
 US US

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

4. FEI Number Applied For
59-1815615 Not Applicable

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

6. Name and Address of Current Registered Agent
RACZ, ALEX
 2216 NE 7TH ST
 HALLANDALE FL 33009

7. Name and Address of New Registered Agent
 Name **VALENTINO AZZOLI**
 Street Address (P.O. Box Number is Not Acceptable)
2208 N.E 7TH ST
 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: *Valentino Azzoli* DATE: **3/10/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	VD ARNOLD, PHILLIP 2215 NE 7TH ST. HALLANDALE, FL 00000	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOR, HELEN 2206 NE 7TH ST HALLANDALE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RACZ, ALEX 2216 N.E. 7TH STREET HALLANDALE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VILLASANA, CARLOS 2212 NE 7TH ST HALLANDALE FL 33009	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ZARNETT, LORI 2221 NE 7TH ST HALLANDALE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AZZOLI, VALENTINO 2208 NE 7TH ST HALLANDALE FL	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT ALEX RACZ 2216 N.E 7TH ST HALLANDALE FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRESIDENT AZZOLI VALENTINO 2208 N.E 7TH ST HALLANDALE FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

2. 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: *Valentino Azzoli* Date: **1/21/2000** Daytime Phone #: **954 458-5822**
Signature and typed or printed name of signing officer or director

CR2E037 (9/99)