2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# 743057

Entity Name: MEADOWBROOK A,B,C,D, INC.

Current Principal Place of Business:

219 NE 14TH AVE
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

219 NE 14TH AVE
HALLANDALE, FL 33009 US

New Mailing Address:

FEI Number: 59-1874839 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CIZMADIA, SHEILA
219 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: DP
Name: TODOROV, TODOR
Address: 233 NE 14TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: VPD
Name: BYK, MAKHAIL
Address: 232 N.E. 12TH AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VPD
Name: MARENESCU, LUIZA
Address: 218 NE 12TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: T
Name: MARCUS, JUDITH
Address: 232 NE 12TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: DS
Name: CIZMADIA, SHEILA
Address: 219 NE 14TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: D
Name: DRAGIF, ANNA
Address: 219 NE 14TH AVE
City-St-Zip: HALLANDALE, FL 33009

I hereby 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 all other like empowered.

SIGNATURE: SHEILA CIZMADIA DS 04/26/2012

Electronic Signature of Signing Officer or Director Date