

2009

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 743626

1. Entity Name

MEADOWBROOK LAKES CONDOMINIUM
APARTMENTS, BUILDING #11, INC.

FILED

09 JUN -9 AM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

325 S.E. 11th Terr.

3. Mailing Address

same

Suite, Apt. # etc

Apt #305

Suite, Apt. #, etc

same

City & State

Dania, Florida

City & State

same

Zip

33004

Country

USA

Zip

33004

Country

USA

4. FEI Number

59-188979

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

RUBENS ONOFRIO, PRES. (954-927-6199)

Street Address (P.O. Box Number is Not Acceptable)

SAME AS #10

City

MEADOWBROOK LAKES

PHASE II - BLDG 11, INC.

325 SOUTHEAST 11th TERRACE

DANIA, FLORIDA 33004

8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

RUBENS ONOFRIO, PRES.

June 5, 2009

Signature typed or carbon name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when registering)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	RUBENS ONOFRIO
STREET ADDRESS	(SAME AS ABOVE)
CITY-ST-ZIP	
TITLE	Vice President
NAME	GEORGE LUSK
STREET ADDRESS	325 S.E. 11TH TERR., #107
CITY-ST-ZIP	DANIA, FL. 33004
TITLE	Treasurer, SECRETARY
NAME	EVELYN PETERSON
STREET ADDRESS	325 S.E. 11th TERR., #407
CITY-ST-ZIP	DANIA, FL. 33004
TITLE	Director
NAME	CONSTANTIN NECULA (APPOINTED)
STREET ADDRESS	325 S.E. 11 TERR., #206
CITY-ST-ZIP	DANIA, FL. 33004
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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 on an attachment with an address, with all other like, empowered.

President

June 5, 2009

CR2037B (12/02)