

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 810843

1. Entity Name

BISCAYNE SEA CLUB

Principal Place of Business

Mailing Address

8000 E DRIVE NORTH BAY VILLAGE  
MIAMI- BCH-FL 33141

8000 E DRIVE NORTH BAY VILLAGE  
MIAMI- BCH-FL 33141

2. Principal Place of Business

8000 EAST DRIVE

Suite, Apt. #, etc.

3. Mailing Address

8000 EAST DRIVE

Suite, Apt. #, etc.

City & State  
NORTH BAY VILLAGE

City & State  
NORTH BAY VILLAGE

4. FEI Number

59-0787519

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

Name

WANDA GIUDICI

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

8010 EAST DRIVE #208

City

NORTH BAY VILLAGE

FL

Zip Code

33141

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

Wanda L. Giudici

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GIUDICI, GERALD 8010 E DRIVE #208 N BAY VILLAGE FL 33141	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIUDICI, WANDA 8010 EAST DR. #307 N BAY VILLAGE FL 33141	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESCOBAR, RODRIGO 8010 E DRIVE #110 N BAY VILLAGE FL 33141	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VEGA, IVAN 8000 E DRIVE #205 N BAY VILLAGE FL 33141	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PINGITORE, FRANK L 8015 E DRIVE #312 N BAY VILLAGE FL 33141	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT ELEANOR GRINGLER 8010 EAST DRIVE #307 NORTH BAY VILLAGE, FL 33141	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER MARJORIE MOLWAY 8020 EAST DRIVE #117 NORTH BAY VILLAGE, FL 33141	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY PASQUALE VARONE 8000 EAST DRIVE #306 NORTH BAY VILLAGE, FL 33141	<input type="checkbox"/> Change <input checked="" 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	PRESIDENT FRANK L. PINGITORE 8010 EAST DRIVE #312 NORTH BAY VILLAGE, FL 33141	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

MARJORIE E. MOLWAY

March 10, 2002

305-754-5940



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)