

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0002157 AF

DOCUMENT # L95000000077

1. Entity Name
HILLSBORO BAY BY-THE SEA, L.C.

00 APR 21 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
9836 WEST SAMPLE ROAD
CORAL SPRINGS FL 33065

Mailing Address
9836 WEST SAMPLE ROAD
CORAL SPRINGS FL 33065-4006



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

mm

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0568131

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OSINSKI, VAL L
9836 WEST SAMPLE ROAD
CORAL SPRINGS FL 33065

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE NAME ☐ Delete
MGRM AMICA HOLDINGS, INC.
STREET ADDRESS 4121 CORAL HILLS DR
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP 700003241387--7
-05/05/00--01000-023
*****50.00 *****50.00

TITLE NAME ☐ Delete
MGRM BORSA HOLDINGS, INC.
STREET ADDRESS 4121 CORAL HILLS DR
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
MGRM BLUE PAPER, INC.
STREET ADDRESS 3403 DOW STREET
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
MGR IERACITANO, JOSEPH
STREET ADDRESS 3403 DOW STREET
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

GIUSELLE BORSECCO
BORSA HOLDINGS

13/04/2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (9/99)