## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # **N11573** Apr 10, 2000 8:00 am Secretary of State VIZCAYA AT PALM-AIRE ASSOCIATION, INC. 04-10-2000 90025 003 \*\*\*\*61.25 Principal Place of Business Mailing Address 3500 GATEWAY DR 3500 GATEWAY DR STE 202 STE 202 POMPANO BEACH FL 33069-4870 POMPANO BEACH FL 33069 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-2710019 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CALATCHI, RALPH DR. 3500 GATEWAY DR STE 202 Zip Code City POMPANO BEACH FL 33069 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) Make Check Payable to 9. Election Campaign Financing **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME CALATCHI, R. DR. STREET ADDRESS STREET ADDRESS 1280 S.W. 36TH AVE. STE. #301 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL Delete TITLE ☐ Change ☐ Addition SD TITLE NAME NAME HERTZ, JOHN STREET ADDRESS STREET ADDRESS 1280 S.W. 36TH AVE. STE. #301 CITY-ST-ZIP CITY-ST-ZIP PMMPANO BEACH FL 33069 X Delete TITI F XX Change ☐ Addition TD TITLE TDNAME GOTTLIEB, KENNETH NAME Droz, Robert STREET ADDRESS STREET ADDRESS 3500 GATEWAY DR., STE 202 3500 Gateway Dr. Ste 202 CITY-ST-ZIP CITY-ST-ZIP Pompano Beach, F1. 33069 Jange POMPANO BEACH FL 33069 Delete ☐ Addition TITLE TITLE NAME NAME BIAFORA, MARTIN STREET ADDRESS STREET ADDRESS 3500 GATEWAY DR., STE 202 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33069 Change ☐ Addition TITLE ☐ Delete MOORE, CONRAD NAME NAME STREET ADDRESS STREET ADDRESS 3500 GATEWAY DR., STE 202 CITY-ST-7IP CITY-ST-ZIP POMPANO BCH FL\_33069 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME Gutterman, Robert STREET ADDRESS STREET ADDRESS 3500 Gateway Drive Ste 202 CITY-ST-ZIP CITY-ST-7IP 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

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changed, or on an attachment with an address, with all other like empowered

Daytime Phone #

Additions D Landes, Martin 3500 Gateway Drive Suite 202 Pompano Beach, F1. 33069

D Klein, Mack 3500 Gateway Drive Suite 202 Pompano Beach, Fl. 33069

D Meyers, Pat 3500 Gateway Drive, Suite 202 Pompano Beach, Fl. 33069