

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90042 017 ****61.25

0001411

DOCUMENT # N13883

1. Entity Name

CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "31" A

Principal Place of Business

Mailing Address

2901 SIMMS ST
 HOLLYWOOD FL 33020
 US

2901 SIMMS ST
 HOLLYWOOD FL 33020
 US

2. Principal Place of Business

3. Mailing Address

2035 Harding St

2035 Harding St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 200

Suite 200

City & State

City & State

Hollywood, FL

Hollywood, FL

Zip

Country

Zip

Country

33020

U.S.

33020

U.S.



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2795332

Applied For

Not Applicable

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

MEYROWITZ, ANDREW
 2035 Harding St suite 200
 HOLLYWOOD FL 33020

c/o DCI

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 \$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: PD
 NAME: LEIKIN, PEGGY Delete
 STREET ADDRESS: 827 NE 199TH ST N, #104
 CITY-ST-ZIP: N MIAMI FL 33179

TITLE: VPD
 NAME: Kim Washington-Coleman Change Addition
 STREET ADDRESS: 827 NE 199 ST #106
 CITY-ST-ZIP: N miami, FL 33179

TITLE: VD
 NAME: KROCHACK, RICHARD Delete
 STREET ADDRESS: 827 NE 199 ST #206
 CITY-ST-ZIP: MIAMI FL

TITLE: PD
 NAME: KORCHAK, RICHARD E. Change Addition
 STREET ADDRESS: 827 NE 199 ST #206
 CITY-ST-ZIP: N-miami, FL 33179

TITLE: D
 NAME: CLEMONS, CATHY Delete
 STREET ADDRESS: 827 N.E. 199TH ST.,#202
 CITY-ST-ZIP: MIAMI FL

TITLE: STD
 NAME: Solange Arroyo Change Addition
 STREET ADDRESS: 827 NE 199 ST #202
 CITY-ST-ZIP: N miami, FL 33179

TITLE: Delete

TITLE: Change Addition

TITLE: Delete

TITLE: Change Addition

TITLE: Delete

TITLE: Change 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: Richard E. Korchak, PD RICHARD E. KORCHAK 3-9-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)