

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 31, 2001 8:00 am**  
**Secretary of State**

0010683

**DOCUMENT # N21376**

1. Entity Name

**WATERSEdge AT THE LAKES OF DELRAY CONDOMINIUM D**

04-26-2001 90240 019 \*\*\*\*61.25

07-31-2001 90227 039 \*\*\*\*61.25

Principal Place of Business

PRIME MANAGEMENT GROUP INC  
 6300 PARK OF COMMERCE BLVD.  
 BOCA RATON FL 33487-8290  
 US

Mailing Address

PRIME MANAGEMENT GROUP INC  
 6300 PARK OF COMMERCE BLVD.  
 BOCA RATON FL 33487-8290  
 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number **65-0010624**

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

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

City

**FL**

Zip Code

**SWATT, MYRON**  
**PRIME MANAGEMENT GROUP INC**  
**6300 PARK OF COMMERCE BLVD.**  
**BOCA RATON FL 33487**

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**

**After September 12, 2001, min. will be \$236.25**

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** ☒ Delete  
 NAME **ZIGMAN, MAX**  
 STREET ADDRESS **5574 WITNEY DRIVE, APT. 103**  
 CITY-ST-ZIP **DELRAY BCH FL 33484**

TITLE **2 VP** ☐ Change ☒ Addition  
 NAME **Friedman, Gilda**  
 STREET ADDRESS **5574 Witney Drive, Apt. 302**  
 CITY-ST-ZIP **Delray Beach, FL 33484**

TITLE **VPD** ☒ Delete  
 NAME **GORDON, BEA**  
 STREET ADDRESS **5574 WITNEY DR #204**  
 CITY-ST-ZIP **DELRAY BCH FL 33484**

TITLE **PD** ☐ Change ☒ Addition  
 NAME **Nissim, Danon**  
 STREET ADDRESS **5574 Witney Drive Apt. 111**  
 CITY-ST-ZIP **Delray Beach, FL 33484**

TITLE **SD** ☒ Delete  
 NAME **CRAVITZ, BETTY**  
 STREET ADDRESS **5574 WITNEY DR #110**  
 CITY-ST-ZIP **DELRAY BCH FL 33484**

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

TITLE **TD** ☐ Delete  
 NAME **FEIN, CHARLES**  
 STREET ADDRESS **5574 WITNEY DR #111**  
 CITY-ST-ZIP **DELRAY BCH FL 33484**

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

TITLE **SD** ☐ Delete  
 NAME **CRAVETZ, BETTY**  
 STREET ADDRESS **5574 WITNEY DR, #110**  
 CITY-ST-ZIP **DELRAY BEACH FL 33484**

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

TITLE **VP** ☐ Delete  
 NAME **FINKEL, BOB**  
 STREET ADDRESS **5574 WITNEY DR, #202**  
 CITY-ST-ZIP **DELRAY BEACH FL 33484**

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

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:

**SIGNATURE: DANON**

**7/19/01**

**54-498-8263**

CR2E037 (5/01)