

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N29472

1. Entity Name

3000 ISLAND BOULEVARD CONDOMINIUM ASSOCIATION, I

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90987 038 \*\*\*\*61.25

Principal Place of Business

Mailing Address

3000 ISLAND BLVD  
WILLIAMS ISLAND  
AVENTURA FL 33160

3000 ISLAND BLVD  
WILLIAMS ISLAND  
AVENTURA FL 33160-4923

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0090625

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

SKRLD, INC  
201 ALHAMBRA CIRCLE, SUITE 1102  
CORAL GABLES FL 33134

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 ☒ Delete  
NAME EPSTEIN, AL  
STREET ADDRESS 3000 ISLAND BLVD., #502  
CITY-ST-ZIP AVENTURA FL 33160

TITLE Director ☐ Change ☒ Addition  
NAME Dr. Meister, Mal  
STREET ADDRESS 3000 Island Boulevard, #2704  
CITY-ST-ZIP Aventura, Florida 33160

TITLE D ☐ Delete  
NAME DIAMOND, ROBERT  
STREET ADDRESS 3000 ISLAND BLVD STE 1806  
CITY-ST-ZIP AVENTURA FL 33160

TITLE President ☒ Change ☐ Addition  
NAME Diamond, Robert  
STREET ADDRESS 3000 Island Boulevard #1806  
CITY-ST-ZIP Aventura, FL 33160

TITLE SD ☐ Delete  
NAME SWARTE, RAE  
STREET ADDRESS 3000 ISLAND BLVD STE 2603  
CITY-ST-ZIP AVENTURA FL 33160

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

TITLE TD ☐ Delete  
NAME SILVERMAN, MARC  
STREET ADDRESS 3000 ISLAND BLVD STE 2205  
CITY-ST-ZIP AVENTURA FL 33160

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

TITLE VP ☐ Delete  
NAME SCHNEIDER, RUEBEN  
STREET ADDRESS 3000 ISLAND BLVD #604  
CITY-ST-ZIP AVENTURA FL 33160

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

TITLE D ☐ Delete  
NAME COHEN, GERALD  
STREET ADDRESS 3000 ISLAND BLVD #1903  
CITY-ST-ZIP AVENTURA FL 33160

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:

*Thomas J. McGuire* - President 4/27/00

(305) 933-4301

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)