Daytime Phone #

2001: UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

FILED Mar 13, 2001 8:00 am² Secretary of State DOCUMENT # N39471 1. Entity Name MYSTIC POINTE TOWER 400 CONDOMINIUM ASSOCIATION. 03-13-2001 90318 008 ****61.25 Mailing Address Principal Place of Business 3500 MYSTIC POINTE DRIVE 3500 MYSTIC POINTE DRIVE ロリリをコリコリ AVENTURA FL 33180 AVENTURA FL 33180 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0205274 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SKRID, INC. 201 ALHAMBRA CIRCLE, SUITE 1102 CORAL GABLES FL 33134 <u>3020</u> 8. The above named entity sopmits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of FILE NOW: 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. resipent ☐ Addition Delete TITLE TITLE Gene Winter NAME NAME 3500 Mysrie Pointe Dr. 3407 STREET ADDRESS STREET ADDRESS Aventura, FL. 33180 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITI F ☐ Delete TITLE Patsy Meachum MEACHUM, PATSY NAME NAME 3500 MYSTIC POINTE 205 STREET ADDRESS STREET ADDRESS 3500 MYSTIC POINTE DRIVE, #205 AUCTITURA, CITY-ST-ZIP AVENTURA FL 33180 CITY-ST-ZIP reasure. Change DP ☐ Addition ☐ Delete TITLE TITLE marky Ezrin WINTERMAN, GENE 3500 mystic Pointe Da. 1704 NAME NAME STREET ADDRESS STREET ADDRESS 3500 MYSTIC POINTE DRIVE # 3407 CITY-ST-ZIP CITY-ST-7IP Aventura **AVENTURA FL 33180** Secretar ☐ Addition ☐ Delete TITLE TITLE FEINSTEIN, HONEY Fein stein NAME 3500 mystic Pointe Dr 2908 STREET ADDRESS 3500 MYSTIC PT. DRIVE #2908 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Aventure **AVENTURA FL 33180** TITLE ☐ Delete SAPERSTEIN, IRV NAME NAME STREET ADDRESS STREET ADDRESS 3500 MYSTIC POINT DR CITY-ST-ZIP CITY-ST-ZIP **AVENTURA FL 33180** TITLE ☐ Delete TITLE EZRIN. MARTY NAME NAME 3500 MYSTIC POINTE DRIVE, #1704 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVENTURA FL 33180 12. I hereby certify that the information supplied with this filling 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 receive for 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.