

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 DOCUMENT # N93000001397 1. Corporation Name

ANTIQUE CLUB OF HOLLYWOOD, INC.

## Mar 11, 1999 8:00 am § Secretary of State

03-11-1999 90054 013 \*\*\*\*61.25

, , ,								
Principal Place of Business Mailing Address					<b>-</b>			
4551 NW 67TH TERR LAUDERHILL FL 33319 US		4551 NW 67TH TERR LAUDERHILL FL 33319 US						
	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 03/26/1993			
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.					4. FEI Number	Apr	olied For	
22 27 27			<b>-</b> .	٠. ٠	65-0429483	<del></del>	Applicable	
City & State	<del> </del>	City & State			5. Certificate of Status Desired	\$8.75 A		
23		28				Fee Rec		
Zip	Country	h'' —	Country	,	6. Election Campaign Financing	\$5.00 N Added to	-	
24	9. Name and Address of Current	29 30			Trust Fund Contribution  10. Name and Address of New Registered A		rees	
	5. Name and Address of Current	Kadiorara where	81	Name		<u> 4</u>		
AVELBOD DENIA				Ctuant Add	ress (P.O. Box Number is Not Acceptable)			
AXELROD, DENA			82	Street Addr	ress (F.O. Box reditiber is red Acceptable)			
4551 NW 67TH TERR LAUDERHILL FL 33319			83					
	LL 1 L 00010		84	City	FL.	85 Zip C	ode	
l office or n	egistered agent, or both, in the State of mamiliar with, and accept the obligation of the state of mamiliar with, and accept the obligation of the state of the s	ons of Section 617.0503, Florida S	ized by Statutes LO	ine corporations. SUTL	poration submits this statement for the purpose of con's board of directors. I hereby accept the appoint when renstating)  ADDITIONS/CHANGES TO OFFICERS ANI	1999		
TITLE	PD		.1 TITLE			Change	Addition	
NAME	CARMELI, CELINA	1	.2 NAME					
STREET ADDRESS	69 N. FEDERAL HWY	<b>1</b>	.3 STREE	T ADDRESS	•			
CITY-ST-ZIP	DANIA FL 33004		1.4 CITY-9	T-ZIP	· · · · · · · · · · · · · · · · · · ·	=10		
TITLE	SD	☐ DELETE 2.1 71				Change	Addition i	
NAME	BURNS, VIOLA		2.2 NAME					
STREET ADDRESS	2031 POLK ST	1	2.3 STREE 2.4 CITY-1	TADDRESS				
TITLE	HOLLYWOOD FL* TD	DFL 2.4		31-2#		Change	Addition	
NAME	AXELROD, DENA	_	3.2 NAME					
STREET ADDRESS	4551 NW 67 TERR		3.3 STREE	TAODRESS			ĺ	
CITY-ST-ZIP	LAUDERHILL FL		3.4. CITY-	ST-ZIP				
TITLE	VD	☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME	STOLTZ, SYLVIA		1. 2 NAME					
STREET ADORESS				TADDRESS		•	ļ	
CITY-ST-ZIP	HOLLYWOOD FL		5.4 CITY-S 5.1 TITLE	ST-ZIP	<del></del>	Change	Addition	
TITLE		_	5.2 NAME					
NAME STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		i i	5.4 CITY- \$					
TITLE	<del></del>	☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAME	- 1			1	

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

NAME

STREET ADDRESS