

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 08, 2000 8:00 am**  
**Secretary of State**

03-08-2000 90017 016 \*\*\*\*66.25

**DOCUMENT # N93000002278** ✓  
**1. Entity Name**  
**MALTA HOUSE, INC.** ORDER OF MALTA, SOUTH FLORIDA, INC. *NK*

**Principal Place of Business** **Mailing Address**  
**800 DOUGLAS RD** **100 ANCHOR DR**  
**STE 340** **OCEAN REEF CLUB #452**  
**MIAMI FL 33134** **KEY LARGO FL 33037-5277**

**2. Principal Place of Business** **3. Mailing Address**  
**Suite, Apt. #, etc.** **24 Dockside Ln.**  
**City & State** **City & State**  
**Key Largo, FL**  
**Zip** **Country** **Zip** **Country**  
**33037** **USA**



DO NOT WRITE IN THIS SPACE

**4. FEI Number** **65-0416447** **Applied For**  
**Not Applicable**  
**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**  
**CARNEY, THOMAS F JR**  
**1101 N. CONGRESS AVENUE**  
**SUITE 200**  
**BOYNTON BEACH FL 33426**

**7. Name and Address of New Registered Agent**  
**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** ☐ **\$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	P SMITH, HERSEL F JR. 100 ANCHOR DR #452 KEY LARGO FL 33037	TITLE	P SMITH, HERSEL F JR. 24 DOCKSIDE LN. #452 KEY LARGO, FL. 33037
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	S CARNEY, ALICE 10205 COLLINS AVE BAL HARBOUR FL	TITLE	S CARNEY, ALICE 1033 WATERWAY LANE DELRAY BEACH, FL 33483
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D FLOOD, THOMAS J 17 NURMI DR FORT LAUDERDALE FL 33301	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	AS CARNEY, THOMAS F JR. 1101 N. CONGRESS AVENUE, SUITE 200 BOYNTON BEACH FL 33426	TITLE	AS CARNEY, THOMAS F JR. 811 GEORGE BUSH BLVD. DELRAY BEACH, FL 33483
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D FLOOD, SARA 17 NURMI DR FORT LAUDERDALE FL 33301	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D KAYAL, LORRAINE 6850 SW 99 TERR MIAMI FL 33156	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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]* **2-22-00 305-443-3888**

CR2E037 (9/99)