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Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000001521 (0)
Corporation Name

BUSINESS LEADERS OF AVENTURA, INC.

Principal Place of Business

Mailing Address

2875 N.E. 191 STREET PH3A
AVENTURA FL 33180

2875 N.E. 191 STREET PH3A
AVENTURA FL 33180



3. Date Incorporated or Qualified

03/19/1997

4. FEI Number

65-0781545

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 666 71 STREET

22 City & State

27 ATTN: ALAN LIPS

23 Zip

Country

28 MIAMI BEACH, FL

29 33141

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROUSSO, MARK E
2875 N.E. 191 STREET PH3A
AVENTURA FL 33180

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME ROUSSO, MARK
STREET ADDRESS 2875 N.E. 191 STREET PH3A
CITY-ST-ZIP AVENTURA FL 33180

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE VPD ☐ DELETE

NAME PACHTER, LESLIE
STREET ADDRESS 2875 N.E. 191 STREET PH3A
CITY-ST-ZIP AVENTURA FL 33180

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE SD ☐ DELETE

NAME ROZEN, JEFFREY E
STREET ADDRESS 2875 N.E. 191 STREET PH3A
CITY-ST-ZIP AVENTURA FL 33180

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☒ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

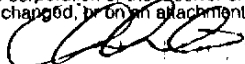
☐ Change

☐ Addition

TR
ALAN LIPS
666 71 STREET
MIAMI BEACH, FL 33141

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, by an attachment with an address.

SIGNATURE:



2/5/98

305-868-3600

CR2E037 (10/97)