

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 11, 2002 8:00 am**  
**Secretary of State**

02-11-2002 90105 031 \*\*\*\*61.25

**DOCUMENT # N97000002558**

1. Entity Name

**EASTERN SHORES-AVENTURA YACHT CLUB, INC.**

Principal Place of Business

Mailing Address

530 HIBISCUS DR  
 HALLANDALE FL 33009

530 HIBISCUS DR  
 HALLANDALE FL 33009



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

3501 Keyser Avenue

3501 Keyser Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit 32

Unit 32

City & State

City & State

Hollywood, FL

Hollywood, FL

4. FEI Number

65-0908218

Applied For

Not Applicable

Zip

Country

Zip

Country

33021

Broward

33021

Broward

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

PARMETT, GEORGE  
 530 HIBISCUS DR  
 HALLANDALE FL 33009

Name

Howard Grant

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

3501 Keyser Avenue

Unit 32

City

Hollywood

FL

Zip Code

33021

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

*Howard Grant* **Conno Do RB**

*1/24/02*

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 PARMETT, GEORGE  
 STREET ADDRESS 530 HIBISCUS DR  
 CITY-ST-ZIP HALLANDALE FL 33009

TITLE PD  Change  Addition  
 NAME Grant, Howard  
 STREET ADDRESS 3501 Keyser Ave., Unit 32  
 CITY-ST-ZIP Hollywood, FL 33021

TITLE D  Delete  
 NAME BURKE, HARVEY  
 STREET ADDRESS 20505 E COUNTRY CLUB DR  
 CITY-ST-ZIP AVENTURA FL 33180

TITLE D  Change  Addition  
 NAME Orlan, Jerry  
 STREET ADDRESS 100 Golden Isles Dr., #1204  
 CITY-ST-ZIP Hallandale, FL 33009

TITLE TD  Delete  
 NAME GRANT, HOWARD  
 STREET ADDRESS 18051 BISCAYNE BLVD APT 1804  
 CITY-ST-ZIP AVENTURA FL 33160

TITLE SD  Change  Addition  
 NAME Itchkow, Myra  
 STREET ADDRESS 18081 Biscayne Blvd., #505  
 CITY-ST-ZIP Aventura, FL 33160

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE TD  Change  Addition  
 NAME Gogh, Bob  
 STREET ADDRESS 3811 N.E. 166th St.  
 CITY-ST-ZIP North Miami Beach, FL 33160

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: X *Howard Grant* **SIGNATURE REQUIRED** Howard Grant, Pres. *1/24/02* 954-963-0560

CR2E037 (9/01)