

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001750

1. Entity Name

MR. AND MRS. CLUB, INC.

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90019 049 \*\*\*\*61.25

Principal Place of Business Mailing Address  
20381 NE 30TH AVE. #416 20381 NE 30TH AVE. #416  
AVENTURA FL 33180 AVENTURA FL 33180-1579



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address  
18011 BISCAYNE BLVD 18011 BISCAYNE BLVD  
Suite, Apt. #, etc. 1101 Suite, Apt. #, etc. 1101  
City & State AVENTURA FL City & State AVENTURA FL  
Zip 33160 Country USA Zip 33160 Country USA

4. FEI Number 65-0909575 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
BRANDES, CAROLE  
20381 NE 30TH AVE. #416  
AVENTURA FL 33180

7. Name and Address of New Registered Agent  
Name DANIEL ABRAHAM  
Street Address (P.O. Box Number is Not Acceptable) 18011 BISCAYNE BLVD. #1101  
City AVENTURA FL Zip Code 33160

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 *Daniel Abraham* 2-10-00  
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	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCISS, MATTI		NAME	ADLERSTEIN, HERSH	
STREET ADDRESS	3701 N. COUNTRY CLUB DR APT 1707		STREET ADDRESS	2801 NE 183 ST. #304	
CITY-ST-ZIP	MIAMI FL 33180		CITY-ST-ZIP	AVENTURA, FL 33160	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MANE, LINDA		NAME	GREENBERG, ALICE	
STREET ADDRESS	20381 NE 30TH AVE APT 410		STREET ADDRESS	10500 N. COUNTRY CLUB DR. #702	
CITY-ST-ZIP	MIAMI FL 33180		CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SUNSHIRE, CHARLOTTE		NAME	WULKAN, ELIZABETH	
STREET ADDRESS	2910 POINT EAST DR. M205		STREET ADDRESS	15600 NE 6 AVE	
CITY-ST-ZIP	MIAMI FL 33150		CITY-ST-ZIP	NORTH MIAMI, FL 33162	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ADLERSTEIN, HERSH		NAME	PARKINS, LLOYD	
STREET ADDRESS	2801 NE 183 ST.		STREET ADDRESS	16570 NE 26 AVE. #2450	
CITY-ST-ZIP	MIAMI FL 33160		CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRANDES, CAROLE		NAME	PORETSKY, MARTIN	
STREET ADDRESS	20381 NE 30TH AVE. APT 416		STREET ADDRESS	605 IVES DAIRY RD. #G102	
CITY-ST-ZIP	MIAMI FL 33180		CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	SCISS, MATTI	
STREET ADDRESS			STREET ADDRESS	3701 N. COUNTRY CLUB DR. #1707	
CITY-ST-ZIP			CITY-ST-ZIP	AVENTURA, FL 33180	

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]* Jan 29, 2000 305/437-0866  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)