

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90503 010 ****61.25

DOCUMENT # N98000001750

1. Entity Name
MR. AND MRS. CLUB, INC.



Principal Place of Business
18011 BISCAYNE BLVD #1101 AVENTURA FL 33166

Mailing Address
18011 BISCAYNE BLVD #1101 AVENTURA FL 33166



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

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
**ABRAHAMS, DANIEL
18011 BISCAYNE BLVD #1101
AVENTURA FL 33160**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Daniel Abrahams* DATE *4/19/03*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PARKINS, LLOYD 16570 NE 26TH AVENUE #2A-S NORTH MIAMI BEACH FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WUEKAN, ESTHER 1200 NE MIAMI GARDENS DRIVE, #101A NORTH MIAMI BEACH FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WULKAN, ELIZABETH 1200 NE MIAMI GARDENS DRIVE #703 N MIAMI BEACH FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PARKINS, LAURA 16570 NE 26TH AVENUE, #2A SOUTH NORTH MIAMI BEACH FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ADLERSTEIN, HERSH 2801 NE 183RD STREET, #304 AVENTURA FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCISS, MATTI 3701 N. COUNTRY CLUB DR. #1707 AVENTURA FL 33180

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VP WULKAN, ESTHER 1200 NE MIAMI GARDENS DRIVE, #101A NORTH MIAMI BEACH FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition SD BERNARD PLOTKIN 5245 NORTH BAY ROAD MIAMI BEACH, FL, 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP RICHARD SCARBERRY 3006 GOLDEN ISLE DRIVE #119 HALLANDALE FL 33009

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: *LLOYD PARKINS* **REQUIRED**

1A APR 03 305 949-7102

CR2E037 (10/02)