

# 2000 UNIFORM BUSINESS REPORT (UBR)

1/21

FILED

Apr 24, 2000 8:00 am  
Secretary of State

01-28-2000 90199 033 \*\*\*\*61.25

DOCUMENT # N99000003179

1. Entity Name

MASADA II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

3737 INDIAN CREEK DRIVE  
MIAMI BEACH FL 33139

Mailing Address

3737 INDIAN CREEK DRIVE  
MIAMI BEACH FL 33140-4019

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

L & M Condo Management

City & State Maintenance, Inc.  
275 Fontainebleau Blvd., Suite 200  
Miami, FL 33172

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0926575

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SUPRASKI, LOUIS A  
2450 NE MIAMI GRADENS DR, N  
MIAMI BEACH FL 33180

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  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

|                |                      |                                 |
|----------------|----------------------|---------------------------------|
| TITLE          | PVSD                 | <input type="checkbox"/> Delete |
| NAME           | MEISELS, ISAAC       |                                 |
| STREET ADDRESS | 1335 LINCOLN RD      |                                 |
| CITY-ST-ZIP    | MIAMI BEACH FL 33139 |                                 |
| TITLE          | D                    | <input type="checkbox"/> Delete |
| NAME           | SKLAR, ISAAC         |                                 |
| STREET ADDRESS | 1335 LINCOLN RD      |                                 |
| CITY-ST-ZIP    | MIAMI BEACH FL 33139 |                                 |
| TITLE          | D                    | <input type="checkbox"/> Delete |
| NAME           | TAUBER, SAM          |                                 |
| STREET ADDRESS | 1335 LINCOLN RD      |                                 |
| CITY-ST-ZIP    | MIAMI BEACH FL 33139 |                                 |
| TITLE          |                      | <input type="checkbox"/> Delete |
| NAME           |                      |                                 |
| STREET ADDRESS |                      |                                 |
| CITY-ST-ZIP    |                      |                                 |
| TITLE          |                      | <input type="checkbox"/> Delete |
| NAME           |                      |                                 |
| STREET ADDRESS |                      |                                 |
| CITY-ST-ZIP    |                      |                                 |
| TITLE          |                      | <input type="checkbox"/> Delete |
| NAME           |                      |                                 |
| STREET ADDRESS |                      |                                 |
| CITY-ST-ZIP    |                      |                                 |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                             |                                                                              |
|----------------|-----------------------------|------------------------------------------------------------------------------|
| TITLE          | P                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | TORIUM, Shloime             |                                                                              |
| STREET ADDRESS | 275 Fontainebleau Blvd #200 |                                                                              |
| CITY-ST-ZIP    | Miami FL 33172              |                                                                              |
| TITLE          | V/P                         | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | Eisenberg, Moshe            |                                                                              |
| STREET ADDRESS | 275 Fontainebleau Blvd #200 |                                                                              |
| CITY-ST-ZIP    | Miami FL 33172              |                                                                              |
| TITLE          | T                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | MARKOWITZ, Joseph           |                                                                              |
| STREET ADDRESS | 275 Fontainebleau Blvd #200 |                                                                              |
| CITY-ST-ZIP    | Miami FL 33172              |                                                                              |
| TITLE          | D                           | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Josephovitz, SAM            |                                                                              |
| STREET ADDRESS | 275 Fontainebleau Blvd #200 |                                                                              |
| CITY-ST-ZIP    | Miami FL 33172              |                                                                              |
| TITLE          | D                           | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Eisenberg, Mordechai        |                                                                              |
| STREET ADDRESS | 275 Fontainebleau Blvd #200 |                                                                              |
| CITY-ST-ZIP    | Miami FL 33172              |                                                                              |
| TITLE          | D                           | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | GROSSMAN, Heshel            |                                                                              |
| STREET ADDRESS | 275 Fontainebleau Blvd #200 |                                                                              |
| CITY-ST-ZIP    | Miami FL 33172              |                                                                              |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/17/00 (305) 672-8896

CR2E037 (9/99)