

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 20, 2001 8:00 am
Secretary of State

02-20-2001 90013 038 ***150.00

DOCUMENT # P96000058974

1. Entity Name

D&M CORAL SPRINGS PARK, INC.

Principal Place of Business

**1865 EAST EAGLE TRACE BLVD.
CORAL SPRINGS FL 33071**

Mailing Address

**1865 EAST EAGLE TRACE BLVD.
CORAL SPRINGS FL 33071**

2. Principal Place of Business

2505 LAGUNA TERR
Suite, Apt. #, etc.

3. Mailing Address

2505 LAGUNA Terrace
Suite, Apt. #, etc.
Ft. Lauderdale FL

City & State
Ft. Lauderdale FL

City & State

4. FEI Number **65-0690106**

Applied For

Not Applicable

Zip **33316**

Country **USA**

Zip **33316**

Country **USA**

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

**FLORA, DOMENCIA M
1865 EAST EAGLE TRACE BLVD
CORAL SPRINGS FL 33071**

Name

DOMENICA M FLORA

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

2505 LAGUNA Terrace

City

Ft. Lauderdale

FL

Zip Code

33316

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

Domenica M Flora **Domenica M Flora 2/12/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **FLORA, MICHAEL J**
STREET ADDRESS **1865 EAST EAGLE TRACE BLVD.**
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **DP Michael J. Flora** ☒ Change ☐ Addition
NAME **2505 LAGUNA Terrace**
STREET ADDRESS **Ft. Lauderdale, FL 33316**
CITY-ST-ZIP

TITLE **DVST** ☐ Delete
NAME **FLORA, DOMENICA M**
STREET ADDRESS **1865 EAST EAGLE TRACE BLVD.**
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **DVST** ☒ Change ☐ Addition
NAME **DOMENICA M. FLORA**
STREET ADDRESS **2505 LAGUNA Terrace**
CITY-ST-ZIP **Ft. Lauderdale, FL 33316**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Domenica M Flora **Domenica M Flora** **2/15/01** **(954) 767-0650**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)