

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
 05-03-2001 90957 010 ***150.00

DOCUMENT # P98000044409

1. Entity Name
M & S MANAGEMENT COMPANY

Principal Place of Business
1300 N. FLORIDA MANGO RD #15
WEST PALM BEACH FL 33409

Mailing Address
1300 N. FLORIDA MANGO RD
STE 15
WEST PALM BEACH FL 33409

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3512051**

Applied For
 Not Applicable

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

MALASKY, BRUCE A
1300 N FLORIDA MANGO RD
STE 15
WEST PALM BEACH FL 33409

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

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	PD	<input checked="" type="checkbox"/> Delete
NAME	STRASBERG, L	
STREET ADDRESS	2105 PARK AVE N	
CITY-ST-ZIP	ORLANDO FL 32789	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STRASBERG, JAMES	
STREET ADDRESS	2105 PARK AVE N	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	VSTD	<input type="checkbox"/> Delete
NAME	MALASKY, BRUCE A	
STREET ADDRESS	1300 N. FLORIDA MANGO RD	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	
TITLE	D	<input type="checkbox"/> Delete
NAME	MALASKY, STEPHEN P	
STREET ADDRESS	1300 N. FLORIDA MANGO RD	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	
TITLE	D	<input type="checkbox"/> Delete
NAME	MALASKY, DONALD C	
STREET ADDRESS	1300 N. FLORIDA MANGO RD	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Director, President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Bruce A. Malasky	
STREET ADDRESS	1300 N. Florida Mango Road Suite 15	
CITY-ST-ZIP	West Palm BEach, FL 33409	
TITLE	Director, Treasurer, V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Donald C. Malasky	
STREET ADDRESS	1300 N. Florida mango Road Suite 15	
CITY-ST-ZIP	West Palm Beach, FL 33409	
TITLE	Director, V.P. Sec.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stephen P. Malasky	
STREET ADDRESS	1300 N. Florida Mango Road Suite 15	
CITY-ST-ZIP	West Palm BEach, FL 33409	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bruce A. Malasky
Bruce A. Malasky

4/26/01
 Date

561-471-8600
 Daytime Phone #

CR2E034 (10/00)