

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V09464

1. Entity Name

MANDELL CONSTRUCTION AND DEVELOPMENT, INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90120 038 ***150.00

Principal Place of Business

605 BROADWAY AVE
ORLANDO FL 32803
US

Mailing Address

3236 COLISEUM STREET
NEW ORLEANS LA 70115-3405
US

2. Principal Place of Business

3236 Coliseum St
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

New Orleans, LA

City & State

Zip

70115

Country

US

Country

4. FEI Number

59-3109685

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

JORDAN, EDWARD P., II
13543 EAST HIGHWAY 50
SUITE 1800
CLERMONT FL 34711

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, 2000 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	D	☐ Delete
NAME	BERGER, DAVID E.	
STREET ADDRESS	3236 COLISEUM STREET	
CITY-ST-ZIP	NEW ORLEANS LA 70115	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ 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 supplement thereto is true and correct to the best of my knowledge and belief, 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 thereto if so empowered.

SIGNATURE:

By: DAVID E. BERGER
DAVID E. BERGER, President

Date

Daytime Phone #

504-891-3155

CR2E034 (9/99)