

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90090 049 ***158.75

DOCUMENT # V20716

1. Entity Name

MADISON HOME BUILDERS, INC.

Principal Place of Business

9273 SW 8TH ST
#202
BOCA RATON FL 33428
US

Mailing Address

9273 SW 8TH ST
#202
BOCA RATON FL 33428-6870
US

2. Principal Place of Business

450 NE 20 St

Suite, Apt. #, etc.

suite # 113

City & State

Boca Raton Fl,

Zip

33431

Country

USA

3. Mailing Address

450 NE 20 st

Suite, Apt. #, etc.

suite # 113

City & State

Boca Raton Fl,

Zip

33431

Country

USA

6. Name and Address of Current Registered Agent

SALOMONE, MICHEAL J
7770 W OAKLAND PK BLVD
SUNRISE FL 33351

7. Name and Address of New Registered Agent

Name

Dale Meckler

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

450 NE 20 st # 113

City

Boca Raton Fl.

FL

Zip Code

33431

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]

DALE MECKLER

3-10-00

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

TITLE **PTD**
NAME **VIGLIAROLO, JOSEPH**
STREET ADDRESS **7794 ARIQU VILLA CT**
CITY-ST-ZIP **BOCA RATON FL 33433**

☒ Delete

TITLE **S**
NAME **DONOFRIO, ANN**
STREET ADDRESS **9273 SW 8TH STREET**
CITY-ST-ZIP **BOCA RATON FL 33428**

☒ Delete

TITLE **VP**
NAME **MECKLER, DALE**
STREET ADDRESS **450 NE 20ST #113**
CITY-ST-ZIP **BOCA RATON FL 33431**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VP T**
NAME **Meckler Ana**
STREET ADDRESS **2700 NE 27 Circle**
CITY-ST-ZIP **Boca Raton Fl. 33431**

☐ Change ☒ Addition

TITLE **P S D**
NAME **Meckler, Dale**
STREET ADDRESS **2700 NE 27 Circle**
CITY-ST-ZIP **Boca Raton Fl. 33431**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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.

Pres, Sec. Dir.

SIGNATURE:

[Signature] **DALE MECKLER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/10/00 (561) 391-5076