

2001 UNIFORM BUSINESS REPORT (UBR)

2/8

FILED
Mar 07, 2001 8:00 am
Secretary of State

02-08-2001 90033 001 ****61.25

DOCUMENT # 769760

1. Entity Name

TEN-EIGHTY CONDOMINIUM, INC.

Principal Place of Business

% VASSILIS, TSAGAS
 37 BRACKETT ST.
 BIRGHTON MA 02135

Mailing Address

% VASSILIS, TSAGAS
 37 BRACKETT ST.
 BIRGHTON MA 02135

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2358344**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

TSAGAS, VASSILIS
 1080 92ND ST.
 BAY HARBOR ISLANDS FL 33154

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 **D** ☐ Delete
 NAME **GARCIA, ROBERT**
 STREET ADDRESS **1086 92ND STREET**
 CITY-ST-ZIP **BAY HBR ISLANDS FL**

TITLE **S** ☒ Delete
 NAME **MALEVITIS, CONSTANTINOS**
 STREET ADDRESS **1084 92ND STREET**
 CITY-ST-ZIP **BAY HBR ISLANDS FL**

TITLE **VD** ☐ Delete
 NAME **ANTEQUERA, MARJORIE F.**
 STREET ADDRESS **1082 92ND STREET**
 CITY-ST-ZIP **BAY HBR ISLANDS FL**

TITLE **PTD** ☐ Delete
 NAME **TSAGAS, VASSILIS**
 STREET ADDRESS **1080 92ND STREET**
 CITY-ST-ZIP **BAY HBR ISLANDS FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **S** ☒ Change ☐ Addition
 NAME **GARCIA, ROBERT**
 STREET ADDRESS **1086 92ND STREET**
 CITY-ST-ZIP **BAY HARBOR ISLANDS FL**

TITLE **VD** ☐ Change ☒ Addition
 NAME **GARCIA, YOLANDA**
 STREET ADDRESS **1086 92ND STREET**
 CITY-ST-ZIP **BAY HARBOR ISLAND FL**

TITLE **TD** ☒ Change ☐ Addition
 NAME **ANTEQUERA, MARJORIE F.**
 STREET ADDRESS **1082 92ND STR.**
 CITY-ST-ZIP **BAY HARBOR ISLANDS FL**

TITLE **PTD** ☒ Change ☐ Addition
 NAME **TSAGAS, VASSILIS**
 STREET ADDRESS **1080 92ND STREET**
 CITY-ST-ZIP **BAY HARBOR ISLANDS FL**

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

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

12. 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 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:

VASSILIS TSAGAS (PRESIDENT)

January 22, 2001

67-82-2848

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)