



**339 SIXTH AVENUE, SUITE 1400
PITTSBURGH, PA 15222**
Phone: (412) 391-5555 Fax: (412) 391-7608
E-mail: TitleExpress@grantstreet.com

www.GrantStreet.com

PROPERTY INFORMATION REPORT

ORDER DATE: 08/24/2018

REPORT EFFECTIVE DATE: 20 YEARS UP TO 08/23/2018

CERTIFICATE # 2015-20406

ACCOUNT # 514223BC2260

ALTERNATE KEY # 713640

TAX DEED APPLICATION # 41787

COUNTY, STATE: BROWARD, FL

At the request of the County Tax Collector for the above-named county, a search has been made of the Public Records for the following described property:

LEGAL DESCRIPTION:

Unit 921 of The Towers of Oceanview South, a Condominium, according to the Declaration of Condominium thereof, recorded in Official Records Book 9248, at Page 285, of the Public Records of Broward County, Florida; together with its undivided share in the common elements.

PROPERTY ADDRESS: 600 PARKVIEW DRIVE #921, HALLANDALE BEACH FL 33009-2912

OWNER OF RECORD ON CURRENT TAX ROLL:

JULIOS KOSTA

LISA KOSTA

73 LUNAU LANE

THORNHILL, ONTARIO L3T 5H1

CANADA (Matches Property Appraiser records.)

APPARENT TITLE HOLDER & ADDRESS OF RECORD:

JULIOS KOSTA AND LISA KOSTA

OR: 44517, Page: 884

600 PARKVIEW DRIVE, APT. 921

HALLANDALE, FL 33009 (Per Deed)

MORTGAGE HOLDER OF RECORD:

None found.

LIENHOLDERS AND OTHER INTERESTED PARTIES OF RECORD:

ATCF II FLORIDA-A LLC

P.O. BOX 54972

NEW ORLEANS, LA 70154 (Tax Deed Applicant)

CONCEPTS CONSTRUCTION

Instrument: 114664527

3200 N. OCEAN DR #102

HOLLYWOOD, FL 33019 (Per Notice of Commencement)

SOUTHERN CHUTE INC

Instrument: 114664528

3772 SW 30 AVE

FT. LAUDERDALE, 33312

(Per Notice of Commencement. No State found on document.)

UNIQUE SURETY AND INSURANCE SERVICES, LLC Instrument: 114838108
3801 PGA BLVD., SUITE 600
PALM BEACH GARDENS, FL 33410 (Per Notice of Commencement)

THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC.
600 PARKVIEW DR OFFICE
HALLANDALE, FL 33009 (Per Sunbiz. Declaration recorded at 9248-285.)

RHONDA HOLLANDER, ESQ., REGISTERED AGENT
O/B/O THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC.
314 S. FEDERAL HIGHWAY
DANIA BEACH, FL 33004 (Per Sunbiz)

THE TOWERS OF OCEANVIEW MASTER ASSOCIATION, INC.
T.O.V. MASTER ASSOCIATION, INC.
500 LESLIE DRIVE
HALLANDALE BEACH, FL 33009
(Per Sunbiz. Declaration recorded in 9248-285. Master Association)

GEORGE FRANK MUTLOS, REGISTERED AGENT
O/B/O THE TOWERS OF OCEANVIEW MASTER ASSOCIATION, INC.
400 LESLIE DR. #625
HALLANDALE BEACH, FL 33009 (Per Sunbiz)

PROPERTY INFORMATION REPORT – CONTINUED

PARCEL IDENTIFICATION NUMBER: 5142 23 BC 2260

CURRENT ASSESSED VALUE: \$262,210

HOMESTEAD EXEMPTION: No

MOBILE HOME ON PROPERTY: No

OUTSTANDING CERTIFICATES: N/A

OPEN BANKRUPTCY FILINGS FOUND? No

OTHER INSTRUMENTS ASSOCIATED WITH PROPERTY BUT NO NOTICE REQUIRED:

Quit Claim Deed	OR: 18996, Page: 55
Quit Claim Deed	OR: 41549, Page: 1943
Affidavit	OR: 44517, Page: 887
Continuous Marriage Affidavit	OR: 41549, Page: 1942
Death Certificate	OR: 41549, Page: 1945

This is a Property Information Report that has been prepared in accordance with the requirements of Sections 197.502(4) and (5), Florida Statutes, and which satisfies the minimum standards set forth in the Florida Administrative Code, Chapter 12D-13.016. This report is not title insurance. It is not an opinion of title, title insurance policy, warranty of title or any other assurance as to the status of title, and shall not be used for the purpose of issuing title insurance.

Pursuant to s. 627.7843, Florida Statutes, the maximum liability of the issuer of this property information report for errors or omissions in this property information report is limited to the amount paid for this property information report, and is further limited to the person(s) expressly identified by name in the property information report as the recipient(s) of the property information report.

Christina Young

Title Examiner



MARTY KIAR
BROWARD
COUNTY
PROPERTY APPRAISER

Site Address	600 PARKVIEW DRIVE #921, HALLANDALE BEACH FL 33009-2912	ID #	5142 23 BC 2260
Property Owner	KOSTA,JULIOS KOSTA,LISA	Millage	2513
Mailing Address	73 LUNAU LANE *THORNHILL ON CA L3T 5H1	Use	04
Abbr Legal Description	TOWERS OF OCEANVIEW SOUTH CONDO UNIT 921		

The just values displayed below were set in compliance with [Sec. 193.011](#), Fla. Stat., and include a reduction for costs of sale and other adjustments required by [Sec. 193.011\(8\)](#).

Property Assessment Values					
Year	Land	Building / Improvement	Just / Market Value	Assessed / SOH Value	Tax
2018	\$25,840	\$232,600	\$258,440	\$248,230	
2017	\$26,220	\$235,990	\$262,210	\$225,670	\$4,870.91
2016	\$23,340	\$210,070	\$233,410	\$205,160	\$4,506.06

2018 Exemptions and Taxable Values by Taxing Authority				
	County	School Board	Municipal	Independent
Just Value	\$258,440	\$258,440	\$258,440	\$258,440
Portability	0	0	0	0
Assessed/SOH	\$248,230	\$258,440	\$248,230	\$248,230
Homestead	0	0	0	0
Add. Homestead	0	0	0	0
Wid/Vet/Dis	0	0	0	0
Senior	0	0	0	0
Exempt Type	0	0	0	0
Taxable	\$248,230	\$258,440	\$248,230	\$248,230

Sales History				Land Calculations		
Date	Type	Price	Book/Page or CIN	Price	Factor	Type
8/14/2007	WD-Q	\$350,000	44517 / 884			
1/20/2006	QCD	\$100	41549 / 1943			
11/1/1991	QCD	\$100	18996 / 55			
11/1/1980	WD	\$118,000				
				Adj. Bldg. S.F.		1430
				Units/Beds/Baths		1/2/2.5
				Eff./Act. Year Built: 1980/1979		

Special Assessments								
Fire	Garb	Light	Drain	Impr	Safe	Storm	Clean	Misc
25					TI			
R								
1								

Board of County Commissioners, Broward County, Florida
Records, Taxes, & Treasury

CERTIFICATE OF MAILING NOTICES

Tax Deed #41787

STATE OF FLORIDA
COUNTY OF BROWARD

THIS IS TO CERTIFY that I, County Administrator in and for Broward County, Florida, did on the 2nd day of January 2019, mail a copy of the Notice of Application for Tax Deed to the following persons prior to the sale of property, and that payment has been made for all outstanding Tax Certificates or, if the Certificate is held by the County, that all appropriate fees have been paid and deposited:

JULIOS KOSTA 600 PARKVIEW DRIVE, APT. 921 HALLANDALE, FL 33009	JULIOS KOSTA 73 LUNAU LANE THORNHILL, ONTARIO L3T5H1 CANADA	LISA KOSTA 600 PARKVIEW DRIVE, APT. 921 HALLANDALE, FL 33009	LISA KOSTA 73 LUNAU LANE THORNHILL, ONTARIO L3T5H1 CANADA
ATCF II FLORIDA-A LLC P.O. BOX 54972 NEW ORLEANS, LA 70154	CITY OF HALLANDALE BEACH ATTN CITY ATTORNEY 400 S FEDERAL HIGHWAY 2ND FLR HALLANDALE BEACH, FL 33009	CITY OF HALLANDALE BEACH ATTN CRA DEPT 400 S FEDERAL HWY HALLANDALE BEACH, FL 33009	CONCEPTS CONSTRUCTION 3200 N. OCEAN DR #102 HOLLYWOOD, FL 33019
GEORGE FRANK MUTLOS, REGISTERED AGENT O/B/O THE TOWERS OF OCEANVIEW MASTER ASSOCIATION, INC. 400 LESLIE DR. #625 HALLANDALE BEACH, FL 33009	RHONDA HOLLANDER, ESQ., REGISTERED AGENT O/B/O THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC. 314 S. FEDERAL HIGHWAY DANIA BEACH, FL 33004	SOUTHERN CHUTE INC 3772 SW 30 AVE FT. LAUDERDALE 33312	THE TOWERS OF OCEANVIEW MASTER ASSOCIATION, INC., T.O.V. MASTER ASSOCIATION, INC. 500 LESLIE DRIVE HALLANDALE BEACH, FL 33009
THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC. 600 PARKVIEW DR OFFICE HALLANDALE, FL 33009	UNIQUE SURETY AND INSURANCE SERVICES, LLC 3801 PGA BLVD., SUITE 600 PALM BEACH GARDENS, FL 33410		

THE FOLLOWING AGENCIES WERE NOTIFIED BY INTEROFFICE

BROWARD COUNTY CODE ENFORCEMENT, PERMITTING LICENSING & PROTECTION DIVISION GCW-1 NORTH UNIVERSITY DR PLANTATION, FL 33324	BROWARD COUNTY CODE & ZONING ENFORCEMENT SECTION PLANNING & REDEVELOPEMENT DIV. ENVIRONMENTAL PROTECTION & GROWTH MGMT DEPT GCW – 1 NORTH UNIVERSITY DR MAILBOX 302 PLANTATION, FL 33324	BROWARD COUNTY HIGHWAY CONSTRUCTION & ENGINEERING DIVISION; RIGHT OF WAY SECTION ONE N. UNIVERSITY DR., STE 300 B PLANTATION, FL 33324
BROWARD COUNTY WATER & WASTEWATER 2555 W. COPANS RD POMPANO BEACH, FL 33069	PUBLIC WORKS DEPT REAL PROPERTY GOVERNMENTAL CENTER, RM 326, 115 S. ANDREWS AVE FT. LAUDERDALE, FL 33301	BROWARD COUNTY SHERIFF'S DEPT. ATTN: CIVIL DIVISION FT. LAUDERDALE, FL 33315

I certify that notice was provided pursuant to Florida Statutes, Section 197.502(4)
I further certify that I enclosed with every copy mailed, a statement as follows: 'Warning - property in which you are interested' is listed in the copy of the enclosed notice.
GIVEN UNDER MY HAND AND OFFICIAL SEAL, this 2nd day of January 2019 in compliance with section 197.522 Florida Statutes, 1995, as amended by Chapter 95-147 Senate Bill No. 596, Laws of Florida 1995.

SEAL

Bertha Henry
COUNTY ADMINISTRATOR
Finance and Administrative Services Department
Records, Taxes, & Treasury Division

By _____
Deputy Juliette M. Aikman

Broward County, Florida

RECORDS, TAXES & TREASURY DIVISION/TAX DEED SECTION

NOTICE OF APPLICATION FOR TAX DEED NUMBER 41787

NOTICE is hereby given that the holder of the following certificate has filed said certificate for a tax deed to be issued thereon. The certificate number and year of issuance, the description of the property, and the name in which it was assessed are as follows:

Property ID: 514223-BC-2260
Certificate Number: 20406
Date of Issuance: 05/26/2016
Certificate Holder: ATCF II FLORIDA-A LLC
Description of Property: TOWERS OF OCEANVIEW SOUTH CONDO
UNIT 921

Unit 921 of The Towers of Oceanview South, a Condominium, according to the Declaration of Condominium thereof, recorded in Official Records Book 9248, at Page 285, of the Public Records of Broward County, Florida; together with its undivided share in the common elements.

Name in which assessed: KOSTA,JULIOS KOSTA,LISA
Legal Titleholders: KOSTA,JULIOS
KOSTA,LISA
73 LUNAU LANE
THORNHILL, ONTARIO L3T 5H1
CANADA

All of said property being in the County of Broward, State of Florida.

Unless such certificate shall be redeemed according to law the property described in such certificate will be sold to the highest bidder on the 20th day of February , 2019. Pre-bidding shall open at 9:00 AM EDT, sale shall commence at 10:00 AM EDT and shall begin closing at 11:01 AM EDT at:

broward.deedauktion.net
**Pre-registration is required to bid.*

Dated this 17th day of January , 2019 .

Bertha Henry
County Administrator
RECORDS, TAXES, AND TREASURY DIVISION

By: 

Dana F. Buker
Deputy

This Tax Deed is Subject to All Existing Public Purpose Utility and Government Easements. The successful bidder is responsible to pay any outstanding taxes.

Publish: DAILY BUSINESS REVIEW
Issues: 01/17/2019, 01/24/2019, 01/31/2019 & 02/07/2019
Minimum Bid: 17505.40

BROWARD DAILY BUSINESS REVIEW

Published Daily except Saturday, Sunday and
Legal Holidays
Ft. Lauderdale, Broward County, Florida

STATE OF FLORIDA COUNTY OF BROWARD:

Before the undersigned authority personally appeared BARBARA JEAN COOPER, who on oath says that he or she is the LEGAL CLERK, of the Broward Daily Business Review f/k/a Broward Review, a daily (except Saturday, Sunday and Legal Holidays) newspaper, published at Fort Lauderdale, in Broward County, Florida; that the attached copy of advertisement, being a Legal Advertisement of Notice in the matter of

41787

NOTICE OF APPLICATION FOR TAX DEED
CERTIFICATE NUMBER: 20406

in the XXXX Court,
was published in said newspaper in the issues of

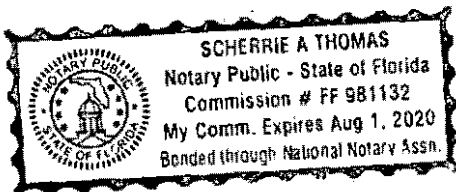
01/17/2019 01/24/2019 01/31/2019 02/07/2019

Affiant further says that the said Broward Daily Business Review is a newspaper published at Fort Lauderdale, in said Broward County, Florida and that the said newspaper has heretofore been continuously published in said Broward County, Florida each day (except Saturday, Sunday and Legal Holidays) and has been entered as second class mail matter at the post office in Fort Lauderdale in said Broward County, Florida, for a period of one year next preceding the first publication of the attached copy of advertisement; and affiant further says that he or she has neither paid nor promised any person, firm or corporation any discount, rebate, commission or refund for the purpose of securing this advertisement for publication in the said newspaper.

Sworn to and subscribed before me this
7 day of FEBRUARY, A.D. 2019

(SEAL)

BARBARA JEAN COOPER personally known to me



Broward County, Florida RECORDS, TAXES & TREASURY DIVISION/TAX DEED SECTION NOTICE OF APPLICATION FOR TAX DEED NUMBER 41787

NOTICE is hereby given that the holder of the following certificate has filed said certificate for a tax deed to be issued thereon. The certificate number and year of issuance, the description of the property, and the name in which it was assessed are as follows:

Property ID: 514223-BC-2260

Certificate Number: 20406

Date of Issuance: 05/26/2016

Certificate Holder:

ATCF II FLORIDA-A LLC

Description of Property:

TOWERS OF OCEANVIEW
SOUTH CONDO

UNIT 921

Unit 921 of The Towers of Oceanview South, a Condominium, according to the Declaration of Condominium thereof, recorded in Official Records Book 9248, at Page 285, of the Public Records of Broward County, Florida; together with its undivided share in the common elements.

Name in which assessed:

KOSTA, JULIOS KOSTA, LISA

Legal Titleholders:

KOSTA, JULIOS

KOSTA, LISA

73 LUNAU LANE

THORNHILL, ONTARIO L3T 5H1
CANADA

All of said property being in the County of Broward, State of Florida.

Unless such certificate shall be redeemed according to law the property described in such certificate will be sold to the highest bidder on the 20th day of February, 2019. Pre-bidding shall open at 8:00 AM EDT, sale shall commence at 10:00 AM EDT and shall begin closing at 11:01 AM EDT at:

broward.deedauction.net

*Pre-registration is required to bid.

Dated this 17th day of January, 2019.

Bertha Henry

County Administrator

RECORDS, TAXES, AND
TREASURY DIVISION

(Seal)

SEE ATTACHED

By: Dana F. Buker

Deputy

This Tax Deed is Subject to All
Existing Public Purpose Utility and
Government Easements. The successful
bidder is responsible to pay any
outstanding taxes.

Minimum Bid: 17505.40

401-314

1/17-24-31 2/7 19-11/0000367421B

BROWARD COUNTY SHERIFF'S OFFICE
P.O. BOX 9507 FORT LAUDERDALE, FLORIDA 33310

RETURN OF SERVICE

Assignment: BT65 SERVE A.S.A.P. - RETURN TO TAX NOTICE TRAY Service Sheet # 19-000718
BROWARD COUNTY, FL vs. KOSTA, JULIOS & KOSTA, LISA TD 41787
PLAINTIFF TAX NOTICE VS. COUNTY/BROWARD DEFENDANT 2/20/2019 CASE #
TYPE OF WRIT KOSTA, JULIOS & OR KOSTAS, LISA COURT 600 PARKVIEW DRIVE #921 HEARING DATE
HALLANDALE BEACH, FL 33009 SERVE

14279
BROWARD COUNTY REVENUE-DELINQ TAX SECTION
115 S. ANDREWS AVENUE, ROOM A-100
FT LAUDERDALE, FL 33301

JULIE AIKMAN, SUPV.
9884 Attorney

Received this process on 1/9/19
Date 1/9/19 11:53 am

☒ Served
☐ Not Served - see comments
1/9/19 Date at 11:53 am Time

On KOSTA, JULIOS & OR KOSTAS, LISA in Broward County, Florida, by serving the within named person a true copy of the writ, with the date and time of service endorsed thereon by me, and a copy of the complaint, petition, or initial pleading, by the following method:

☐ **INDIVIDUAL SERVICE**

SUBSTITUTE SERVICE:

- ☐ At the defendant's usual place of abode on "any person residing therein who is 15 years of age or older", to wit: _____, in accordance with F.S. 48.031(1)(a)
- ☐ To _____, the defendant's spouse, at _____ in accordance with F.S. 48.031(2)(a)
- ☐ To _____, the person in charge of the defendant's business in accordance with F.S. 48.031(2)(b), after two or more attempts to serve the defendant have been made at the place of business

CORPORATE SERVICE:

- ☐ To _____, holding the following position of said corporation _____ in the absence of any superior officer in accordance with F.S. 48.081
- ☐ To _____, an employee of defendant corporation in accordance with F.S. 48.081(3)
- ☐ To _____, as resident agent of said corporation in accordance with F.S. 48.091
- ☐ **PARTNERSHIP SERVICE:** To _____, partner, or to _____, designated employee or person in charge of partnership, in accordance with F.S. 48.061(1)

- ☐ **POSTED RESIDENTIAL:** By attaching a true copy to a conspicuous place on the property described in the complaint or summons. Neither the tenant nor a person residing therein 15 years of age or older could be found at the defendant's usual place of abode in accordance with F.S. 48.183

1st attempt date/time: _____ 2nd attempt date/time: _____

- ☐ **POSTED COMMERCIAL:** By attaching a true copy to a conspicuous place on the property in accordance with F.S. 48.183

1st attempt date/time: _____ 2nd attempt date/time: _____

- ☒ **OTHER RETURNS:** See comments

COMMENTS: POSTED

You can now check the status of your writ by visiting the Broward Sheriff's Office Website at www.sheriff.org and clicking on the icon "Service Inquiry"

SCOTT J. ISRAEL, SHERIFF
BROWARD COUNTY, FLORIDA

BY: [Signature] D.S.

ORIGINAL

BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION
PROPERTY ID # 514223-BC-2260 (TD #41787)

RECEIVED
SHERIFF

2019 JAN -7 AM 8:54

WARNING

BROWARD COUNTY
FLORIDA

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

BROWARD COUNTY SHERIFF'S DEPT
ATTN: CIVIL DIVISION
FT LAUDERDALE, FL 33312

NOTE

AS PER FLORIDA STATUTES 197.542, THIS PROPERTY IS BEING SCHEDULED FOR TAX DEED AUCTION, AND WILL NO LONGER BE ABLE TO BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW PLEASE CALL FOR MORE INFORMATION.

FLA. STATUTES MAY REQUIRE US TO NOTIFY ALL PROPERTY OWNERS WHO LIVE AROUND THE PROPERTY SCHEDULED FOR SALE. IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN THIS PROPERTY, PLEASE DISREGARD THIS LETTER.

PAYMENT MUST BE MADE IN CASH, MONEY ORDER OR CASHIER'S CHECK; PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPTED.

AMOUNT NECESSARY TO REDEEM: (See amounts below)

MAKE CHECKS PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

* Amount due if paid by January 31, 2019\$17,663.15

Or

* Amount due if paid by February 19, 2019\$17,891.40

*AMOUNTS DUE MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING PAYMENT FOR REDEMPTION.

THERE ARE UNPAID TAXES ON THIS PROPERTY AND WILL BE SOLD AT PUBLIC AUCTION ON February 20, 2019 UNLESS THE BACK TAXES ARE PAID.

TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORD, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374 OR 5395

FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT

www.broward.org/recordstaxestreasury

PLEASE SERVE THIS ADDRESS OR LOCATION

KOSTA, JULIOS AND/OR
KOSTA, LISA
600 PARKVIEW DRIVE #921
HALLANDALE BEACH, FL 33009-2912

NOTE: THIS IS THE ADDRESS OF THE PROPERTY SCHEDULED FOR AUCTION

Permit # BOTH-17-02852 Folio # 5142238C

NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement will be made to certain real property and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement:

this space reserved for recorder

1. Legal Description of Property: Lot _____ Block _____ Unit # _____ Bldg # _____ ☐ Lengthy legal attached
Subdivision / Condominium: TOWERS OCEANVIEW SOUTH
Street Address if available: 600 PARKVIEW DR HALLANDALE FL 33009
2. General description of improvement: REMOVE & REPLACE WALLS IN TRASH ROOMS 2-11
3. a. Owner name and address: TOWERS OF OCEANVIEW SOUTH CONDO ASSOC
b. Interest in property: B.O.D
c. Name and address of fee simple titleholder (if other than Owner): N/A
4. a. Contractor name and address: CONCEPTS CONSTRUCTION 954-920-1144
b. Contractor's phone number: 3200 N. OCEAN DR #102, HOLLYWOOD FL 33019
5. a. Surety name and address: N/A
b. Surety's phone number: N/A
c. Amount of bond: \$ _____
6. a. Lender name and address: N/A
b. Lender's phone number: N/A
7. a. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
Name: _____
Address: _____
b. Phone number: _____
8. a. In addition to himself or herself, the Owner designates _____
to receive a copy of Lessor's Notice per Section 713.13(1)(b), Florida
b. Phone number of person or entity designated by owner: _____
9. Expiration date of notice of commencement: _____
(the expiration date is 1 year from the date of recording unless a different date is specified)

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature(s) of Owner(s) or Owner(s) Authorized Officer/Director/Partner/Manager

By Mauricio Guzman By _____
Print Name MAURICIO GUZMAN SIMPES Print Name _____
Title/Office PRESIDENT B.O.D Title/Office _____

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 21 day of June, 2017
by MAURICIO GUZMAN

☐ Individually, or ☐ as _____ for _____
☒ Personally known, or ☐ produced the following type of identification: _____

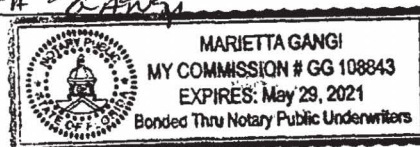
Signature of Notary Public: Marietta Gangi
Print Name: MARIETTA GANGI
(SEAL)

VERIFICATION PURSUANT TO SECTION 92.525, FLORIDA STATUTES

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true, to the best of my knowledge and belief.

Signature(s) of Owner(s) or Owner(s) Authorized Officer/Director/Partner/Manager who signed above:

By Mauricio Guzman By _____



SP-MC-HT-
Permit # 17-02853 Folio # 514223BC

NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement will be made to certain real property and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement:

this space reserved for recorder

1. Legal Description of Property: Lot _____ Block _____ Unit # _____ Bldg # _____ ☐ Lengthy legal attached
Subdivision / Condominium: TOWERS OCEANVIEW SOUTH
Street Address if available: 600 PARKVIEW DR, HALLANDALE FL 33009
2. General description of improvement: REPAIR TRASH CHUTE PH TO TRASH ROOM
3. a. Owner name and address: TOWERS OF OCEANVIEW SOUTH CONDO ASSOC
b. Interest in property: B.O.D
c. Name and address of fee simple titleholder (if other than Owner): N/A
4. a. Contractor name and address: SOUTHERN CHUTE INC 954-475-9191
b. Contractor's phone number: 3712 SW 30 AVE FT. LAUDERDALE 33312
5. a. Surety name and address: _____
b. Surety's phone number: N/A
c. Amount of bond: \$ _____
6. a. Lender name and address: _____
b. Lender's phone number: N/A
7. a. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
Name: _____
Address: _____
b. Phone number: _____
8. a. In addition to himself or herself, the Owner designates _____
to receive a copy of Lienor's Notice per Section 713.13(1)(b), Florida
b. Phone number of person or entity designated by owner: _____
9. Expiration date of notice of commencement: _____
(The expiration date is 1 year from the date of recording unless a different date is specified)

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/Director/Partner/Manager

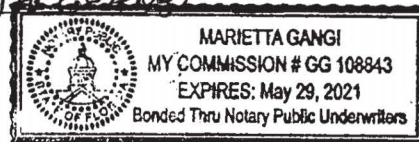
By _____ By _____
Print Name MARIETTA GUXMAN Print Name _____
Title/Office Director/President Title/Office _____

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 21 day of June, 2017.
by MARIETTA GUXMAN
☐ Individually, or ☐ as _____ for _____
☒ Personally known, or ☐ produced the following type of identification: _____

Signature of Notary Public: _____

Print Name: Marietta Gangi
(SEAL)



VERIFICATION PURSUANT TO SECTION 92.525, FLORIDA STATUTES

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true, to the best of my knowledge and belief.

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/Director/Partner/Manager who signed above:

By _____ By _____



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Not For Profit Corporation

THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC.

Filing Information

Document Number	754686
FEI/EIN Number	59-2031768
Date Filed	10/16/1980
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	06/20/2018
Event Effective Date	NONE

Principal Address

600 PARKVIEW DR.
OFFICE
HALLANDALE, FL 33009

Changed: 03/13/2006

Mailing Address

600 PARKVIEW DR.
OFFICE
HALLANDALE, FL 33009

Changed: 03/13/2006

Registered Agent Name & Address

Hollander, Rhonda, Esq.
314 S. Federal Highway
Dania Beach, FL 33004

Name Changed: 01/02/2018

Address Changed: 01/02/2018

Officer/Director Detail

Name & Address

Title D

DILEO, DIEGO

600 PARKVIEW DRIVE
APT. #323
Hallandale, FL 33009

Title D

VALENTINO, GIANNI
600 PARKVIVE DRIVE
APT. #615
HALLANDALE BEACH, FL 33009

Title T

STELLING, MARTIN
600 PARKVIEW DR.
#215/217
HALLANDALE, FL 33009

Title VP

COTTER, AUDREY
600 PARKVIEW DR.
#410
HALLANDALE, FL 33009

Title P

WEXLER, MARTA
600 PARKVIEW DR.
#723
HALLANDALE, FL 33009

Title S

DEAN, SUSAN
600 PARKVIEW DR.
#426
HALLANDALE, FL 33009

Title D

DU FOUR, HENRIETTE
600 PARKVIEW DR.
#506
HALLANDALE, FL 33009

Annual Reports

Report Year	Filed Date
2017	02/09/2017
2018	01/02/2018
2018	01/16/2018

Document Images

06/20/2018 -- Amendment	View image in PDF format
01/16/2018 -- AMENDED ANNUAL REPORT	View image in PDF format
01/02/2018 -- ANNUAL REPORT	View image in PDF format
07/21/2017 -- AMENDED ANNUAL REPORT	View image in PDF format
02/09/2017 -- ANNUAL REPORT	View image in PDF format
07/20/2016 -- AMENDED ANNUAL REPORT	View image in PDF format
03/24/2016 -- ANNUAL REPORT	View image in PDF format
06/16/2015 -- AMENDED ANNUAL REPORT	View image in PDF format
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03/07/2007 -- ANNUAL REPORT	View image in PDF format
03/13/2006 -- ANNUAL REPORT	View image in PDF format
01/13/2005 -- ANNUAL REPORT	View image in PDF format
04/21/2004 -- ANNUAL REPORT	View image in PDF format
02/03/2003 -- ANNUAL REPORT	View image in PDF format
05/27/2002 -- ANNUAL REPORT	View image in PDF format
02/07/2001 -- ANNUAL REPORT	View image in PDF format
01/31/2000 -- ANNUAL REPORT	View image in PDF format
02/25/1999 -- ANNUAL REPORT	View image in PDF format
02/12/1998 -- ANNUAL REPORT	View image in PDF format
01/30/1997 -- ANNUAL REPORT	View image in PDF format
01/31/1996 -- ANNUAL REPORT	View image in PDF format
02/09/1995 -- ANNUAL REPORT	View image in PDF format



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Not For Profit Corporation

THE TOWERS OF OCEANVIEW MASTER ASSOCIATION, INC.

Filing Information

Document Number	754882
FEI/EIN Number	59-2069654
Date Filed	10/29/1980
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	04/24/1989

Principal Address

500 LESLIE DR
C/O REC BLDG
HALLANDALE, FL 33009

Changed: 02/03/1997

Mailing Address

T.O.V. Master Association, Inc.
500 Leslie Drive
Hallandale Beach, FL 33009

Changed: 08/31/2015

Registered Agent Name & Address

Mutlos, George Frank
400 Leslie Dr. #625
Hallandale Beach, FL 33009

Name Changed: 08/31/2015

Address Changed: 08/31/2015

Officer/Director Detail

Name & Address

Title President

Rice, John
T.O.V. Master Association, Inc.

500 LESLIE DRIVE
Hallandale Beach, FL 33009

Title Secretary, VP

Magesis, Richard
500 LESLIE DR
C/O REC BLDG
HALLANDALE, FL 33009

Title Treasurer

Mutlos, George F
500 LESLIE DR
C/O REC BLDG
HALLANDALE, FL 33009

Annual Reports

Report Year	Filed Date
2016	02/11/2016
2017	02/06/2017
2018	03/21/2018

Document Images

03/21/2018 -- ANNUAL REPORT	View image in PDF format
02/06/2017 -- ANNUAL REPORT	View image in PDF format
02/11/2016 -- ANNUAL REPORT	View image in PDF format
12/16/2015 -- AMENDED ANNUAL REPORT	View image in PDF format
08/31/2015 -- AMENDED ANNUAL REPORT	View image in PDF format
03/19/2015 -- ANNUAL REPORT	View image in PDF format
04/24/2014 -- ANNUAL REPORT	View image in PDF format
02/14/2013 -- ANNUAL REPORT	View image in PDF format
02/16/2012 -- ANNUAL REPORT	View image in PDF format
02/21/2011 -- ANNUAL REPORT	View image in PDF format
04/05/2010 -- ANNUAL REPORT	View image in PDF format
03/27/2009 -- Reg. Agent Resignation	View image in PDF format
03/24/2009 -- ANNUAL REPORT	View image in PDF format
02/29/2008 -- ANNUAL REPORT	View image in PDF format
03/28/2007 -- ANNUAL REPORT	View image in PDF format
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03/18/2005 -- ANNUAL REPORT	View image in PDF format
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04/04/2003 -- ANNUAL REPORT	View image in PDF format
04/10/2002 -- ANNUAL REPORT	View image in PDF format
05/17/2001 -- ANNUAL REPORT	View image in PDF format
03/03/2000 -- ANNUAL REPORT	View image in PDF format
03/16/1999 -- ANNUAL REPORT	View image in PDF format
02/03/1998 -- ANNUAL REPORT	View image in PDF format
02/03/1997 -- ANNUAL REPORT	View image in PDF format

02/26/1996 -- ANNUAL REPORT	View image in PDF format
03/09/1995 -- ANNUAL REPORT	View image in PDF format

2
AFTER RECORDING - RETURN TO:

PERMIT NUMBER:

NOTICE OF COMMENCEMENT

The undersigned hereby given notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes the following information is provided in the Notice of Commencement.

1. **DESCRIPTION OF PROPERTY** (Legal description & street address, if available) **TAX FOLIO NO.:** 514 223 BC
SUBDIVISION Three Islands BLOCK _____ TRACT _____ LOT _____ BLDG 600 UNIT 1132
600 Parkview Drive, Hallandale Beach, FL 33009

2. **GENERAL DESCRIPTION OF IMPROVEMENT:**
Gymnasium-Card Room renovation

3. **OWNER INFORMATION:** a. Name Towers of Oceanview South Condominium Association, Inc.
b. Address 600 Parkview Drive, Hallandale Beach, FL 33009 c. Interest in property Common Elements
d. Name and address of fee simple titleholder (if other than Owner)
4. **CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:**
EDISS Construction, Inc., 3389 Sheridan Street #402 Hollywood, FL 33021 - (305) 904-1936

5. **SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:**
Unique Surety and Insurance Services, LLC, 3801 PGA Blvd., Suite 600, Palm Beach Gardens, FL 33410

6. **LENDER'S NAME, ADDRESS AND PHONE NUMBER:**
N/A

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:
NAME, ADDRESS AND PHONE NUMBER:

Towers of Oceanview South Condominium Association, Inc., Management Office, 600 Parkview Drive, Hallandale Beach, FL 33009

8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes:

NAME, ADDRESS AND PHONE NUMBER:
Unique Surety and Insurance Services, LLC, 3801 PGA Blvd., Suite 600, Palm Beach Gardens, FL 33410

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): _____, 20____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

[Signature]
Signature of Owner or
Owner's Authorized Officer/Director/Partner/Manager

Yocasta Gomez, Vice President
Print Name and Provide Signatory's Title/Office

State of Florida
County of Broward

The foregoing instrument was acknowledged before me this 12TH day of January, 20 18

By Yocasta Gomez (name of person), as Vice President
(type of authority,.... e.g. officer, trustee, attorney in fact)
For Towers of Oceanview South Condominium Association, Inc.
(name of party on behalf of whom instrument was executed)

X Personally known _____ Identification: MARIETTA GANGI



[Signature]
(Signature of Notary Public)

Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/ Director / Partner/Manager who signed above:

By [Signature] By Yocasta Gomez, Vice President

Rev. 08-09-07 (S.Recording)

This instrument was prepared by:
Jeffrey M. Perlow, Esq.
1820 E. Hallandale Beach Blvd.
Hallandale, Florida 33009

Stamps \$ 60 Tax \$ —
Documentary Intangible
RECEIVED in Broward County as required by
law.
by Eugenia R. Roney
Deputy Clerk

91492246

QUIT-CLAIM DEED

FOLIO NO. 1223-BC-226

THIS QUIT-CLAIM deed, executed this 26TH day of November, 1991, by ALBERT KULA and SANDRA KULA, his wife, whose post office address is: 2120 DONNA DR. MORRIS, NY 11566, first party, to JACK KULA and ANNETTE KULA, his wife, whose post office address is: 600 PARKVIEW DR. HALLANDALE, FL 33009, second party.

W I T N E S S E T H : That the said first party, for and in consideration of the sum of Ten (\$10.00) Dollars in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quit-claim unto the said second party forever, all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of Broward, State of Florida, to-wit:

Condominium Unit No. 921 of THE TOWERS OF OCEANVIEW SOUTH, A CONDOMINIUM, according to the Declaration of Condominium thereof, filed under Clerk's File No. 80-339106, and recorded Official Records Book 9248, Page 285, of the Public Records of Broward County, Florida.

TO HAVE AND TO HOLD the same together with all and singular the appurtenances thereto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered
in the presence of:

Jeffrey M. Perlow
Jeffrey M. Perlow
Mary Frances Andrews
MARY FRANCES ANDREWS

Albert Kula
ALBERT KULA
Sandra Kula
SANDRA KULA

STATE OF FLORIDA
COUNTY OF BROWARD

RECORDED IN THE OFFICIAL RECORDS BOOK
OF BROWARD COUNTY FLORIDA

COUNTY ADMINISTRATOR

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgements, personally appeared ALBERT KULA and SANDRA KULA, his wife, to me known to be the person described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 26TH day of November, 1991

My Commission Expires:

OFFICIAL NOTARY SEAL
JEFFREY M. PERLOW
NOTARY PUBLIC STATE OF FLORIDA
My Commission Exp. APR. 1, 1993
LAW OFFICES

PERLOW & PERLOW, P.A.
1820 EAST HALLANDALE BEACH BOULEVARD • HALLANDALE, FLORIDA 33009
TELEPHONE (305) 456-1333 • MIAMI (305) 944-9252

91 DEC 16 AM 11 36

BK78996P60055

5
22h

2
Prepared by and record and return to:
Jeffrey M. Perlow, Esquire
Fromberg, Perlow & Kornik, P.A.
18901 Northeast 29 Avenue, Suite 100
Aventura, Florida 33180
(305) 933-2000
Folio No. 1223-BC 226

QUIT CLAIM DEED

THIS QUIT CLAIM DEED, executed this 20th day of January, 2006, by JACK KULA, an unmarried widower, whose post office address is 600 Parkview Drive, Apartment 921, Hallandale, Florida 33009, as party of the first part, to JACK KULA, as Trustee of the JACK KULA REVOCABLE TRUST AGREEMENT dated December 4, 1991, whose address is 600 Parkview Drive, Apartment 921, Hallandale, Florida 33009, with full power and authority to protect, conserve and to sell, or to lease or to encumber or otherwise to manage and dispose of real property described herein, pursuant to F.S. 689.071, Florida Statutes, and with ALBERT KULA, as the Successor Trustee of the Trust, upon the death, disability or inability to serve of JACK KULA, and the written acceptance by the herein named Successor Trustee being also recorded as aforesaid, with the Successor Trustee having the same powers granted to the original Trustee as hereinbefore described, as party of the second part,

WITNESSETH

That the said party of the first part, for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, in hand paid by the said party of the second party, the receipt of which is hereby acknowledged, has granted, bargained and sold, and does hereby transfer and convey unto the said party of the second part, his successor and assigns, the following described property:

Condominium Unit No. 921 of THE TOWERS OF OCEANVIEW SOUTH, A CONDOMINIUM, according to the Declaration of Condominium thereof, filed under Clerk's File No. 80-339106 and recorded in Official Records book 9248, Page 285 of the Public Records of Broward County, Florida.

TO HAVE AND TO HOLD the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

IN WITNESS WHEREOF, the undersigned, has executed this instrument on January 20, 2006.

Executed in the presence of:

[Signature]
(signature of witness)

Lucy Kattana
(printed name of witness)

[Signature]
(signature of witness)

Courtney Perbur
(printed name of witness)

Jack Kula
Jack Kula,

STATE OF FLORIDA

COUNTY OF MIAMI DADE

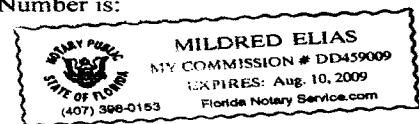
The foregoing instrument was acknowledged, sworn to and signed before me on January 20, 2006 by Jack Kula, who is personally known to me ____ (Yes or no) or who produced FL ID as identification.

Mildred Elias

Notary Public (affix notarial seal)

My Commission Expires:

My Commission Number is:



Prepared by and return to:

Brian E. Port
Attorney at Law
Fromberg, Perlow & Kornik, P.A.
18901 N.E. 29 Ave. Suite 100
Aventura, FL 33180
305-933-2000
File Number: 10626.002
Will Call No.:

[Space Above This Line For Recording Data]

Warranty Deed

This Warranty Deed made this 14th day of August, 2007 between Albert Kula as Trustee of the Jack Kula Revocable Trust Agreement dated December 4, 1991 whose post office address is 12 Hemlet Dr. Plainview NY 11803, grantor, and Julios Kosta and Lisa Kosta, husband and wife whose post office address is 600 Parkview Drive, Apt. 921, Hallandale, FL 33009, grantee:

(Whenever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Broward County, Florida to-wit:

Unit 921 of The Towers of Oceanview South, a Condominium, according to the Declaration of Condominium thereof, recorded in Official Records Book 9248, at Page 285, of the Public Records of Broward County, Florida; together with its undivided share in the common elements.

Parcel Identification Number: 11223 BC 22600

Subject to taxes for 2007, and subsequent years; declaration of condominium, covenants, conditions, restrictions, easements, reservations and limitations of record, if any.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to **December 31, 2006**.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

DoubleTime®

2

Signed, sealed and delivered in our presence:

Witness Name Brian Port

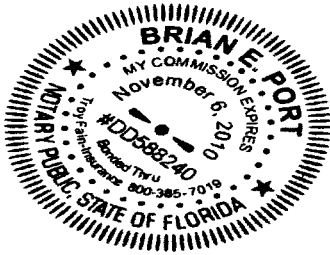
Witness Name RAY SHAPIRO

Albert Kula ^{Trustee}
Albert Kula, Successor Trustee

State of Florida
County of Miami-Dade

The foregoing instrument was acknowledged before me this 14th day of August, 2007 by Albert Kula, Successor Trustee, who [X] is personally known or [] has produced a driver's license as identification.

[Notary Seal]



[Signature]
Notary Public

Printed Name: _____

My Commission Expires: _____

CERTIFICATE OF APPROVAL
WAIVER OF RIGHT OF FIRST REFUSAL
AND
STATEMENT OF ASSESSMENT

In reference to:

Condominium Unit No. 921 of
Towers of Oceanview South, a condo-
minium, according to the Declaration
thereof, recorded at Official Records
Book 9248 Page 285, et seq. of
the Public Records of Broward County,
Florida.

At the request of the present owner, the undersigned officers
of TOWERS OF OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC., operating the
above-described condominium, hereby certify as follows:

1. That JULIOS & LISA KOSTA, as purchaser(s),
has been duly approved by the undersigned Condominium Association, pursuant
to the provisions of the above-described Declaration of Condominium, and
Association waives its right of first refusal.

2. Current assessments owing for this unit are \$ NONE
_____. (If none are owing, insert the word 'none').

3. That all assessments against the above parcel for common
expenses are fully paid as of this date and that the next payment is due
on the 1 day of AUGUST 2007, in the amount of \$554.94 credit
for a period of ONE MONTH to SEPTEMBER 1, 2007 301, 19

DATED this 16 day of JULY 2007 ____.

THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM
ASSOCIATION, INC.

By: Armin J. Lovenvirth
President

Attest: William J. Cotter
Secretary

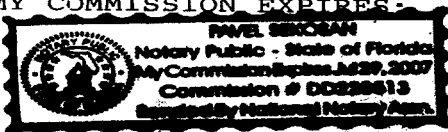
(Corporate Seal)

STATE OF FLORIDA)
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 16
16 day of JULY 2007, by ARMIN LOVENVIRTH as President
and WILLIAM COTTER, as Secretary, respectively, of TOWERS OF
OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC., a Florida corporation not-
for-profit, on behalf of the corporation.

[Signature]
NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

MY COMMISSION EXPIRES:



This instrument was prepared by:

Brian E. Port, Esq.
Fromberg, Perlow & Kornik, P.A.
18901 NE 29th Ave., Suite 100
Aventura, FL 33180

AFFIDAVIT

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, personally appeared Albert Kula, as Trustee of the Jack Kula Revocable Trust Agreement dated December 4, 1991 ("Trust"), who being by me first duly sworn, depose and say as follows:

1. That Albert Kula is the Trustee of the Jack Kula Revocable Trust Agreement dated December 4, 1991

2. That Albert Kula hereby accepts his appointment as succssor trustee.

3. That this Affidavit is executed by the Trustee for the purpose of conveying the following described property:

Unit 921 of The Towers of Oceanview South, a Condominium, according to the Declaration of Condominium thereof, recorded in Official Records Book 9248, at Page 285, of the Public Records of Broward County, Florida; together with its undivided share in the common elements

4. The Trust has been in full force and effect during the period of ownership of the Property.

5. That said Trust is still in force and effect and has not been amended or revoked..

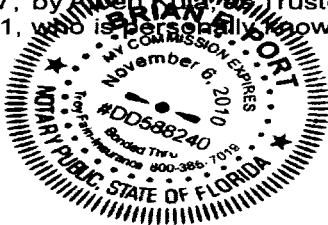
FURTHER AFFIANT SAYETH NOT.



Albert Kula

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

THE FOREGOING INSTRUMENT was sworn to, subscribed and acknowledged before me this 14th day of August, 2007, by Albert Kula, Trustee of the Jack Kula Revocable Trust Agreement dated December 4, 1991, who is personally known to me.





Notary Public
Print Name _____
My Commission Expires: _____

②

CONTINUOUS MARRIAGE AFFIDAVIT

BEFORE ME, the undersigned authority, personally appeared JACK KULA, who being by me first duly sworn, deposes and says as follows:

1. That he is the surviving spouse of ANNETTE KULA, who died on [REDACTED]
2. That at the time of death of ANNETTE KULA, the decedent and JACK KULA were the owners of the following described real property:

Condominium Unit No. 921 of THE TOWERS OF OCEANVIEW SOUTH, A CONDOMINIUM, according to the Declaration of Condominium thereof, filed under Clerk's File No. 80-339106, and recorded Official Records Book 9248, Page 285, of the Public Records of Broward County, Florida.

Folio No. 1223-BC-226 (a/k/a 600 Parkview Drive, #921, Hallandale, FL 33009)

3. That the decedent and JACK KULA were continuously married without interruption by divorce from the date that they acquired the property until the date of death of ANNETTE KULA.

FURTHER AFFIANT SAYETH NOT.

Jack Kula
Jack Kula, Affiant

The foregoing instrument was acknowledged before me this 20 day of January, 2006, by Jack Kula, who is personally known to me _____ (yes or no) or who has produced FL DL as identification.

Mildred Elias
Notary Public

This instrument prepared by/record and return to:
Jeffrey M. Perlow, Esquire
Fromberg, Perlow & Kornik, P.A.
18901 Northeast 29 Avenue, Suite 100
Aventura, Florida 33180
(305) 933-2000



BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION

DATE: January 2nd, 2019

PROPERTY ID # 514223-BC-2260 (TD # 41787)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

JULIOS KOSTA
600 PARKVIEW DRIVE, APT. 921
HALLANDALE, FL 33009

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 600 PARKVIEW DR, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

FLA. STATUTES MAY REQUIRE US TO NOTIFY OTHER PROPERTY OWNERS WHO LIVE AROUND THE PROPERTY SCHEDULED FOR SALE. IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN THIS PROPERTY, PLEASE DISREGARD THIS NOTICE.

PAYMENT MUST BE MADE IN CASH, MONEY ORDER OR CASHIER'S CHECK; PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPTED.

AMOUNTS SHOWN BELOW ARE ESTIMATED AMOUNTS DUE WHICH MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING ANY PAYMENT TO REDEEM UNPAID TAXES AND REMOVE THE PROPERTY FROM AUCTION.

MAKE CASHIER'S CHECK OR
MONEY ORDER PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

* Estimated Amount due if paid by January 31, 2019\$17,663.15

Or

* Estimated Amount due if paid by February 19, 2019\$17,891.40

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON February 20, 2019 UNLESS ALL BACK TAXES ARE PAID PRIOR TO AUCTION.

TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORDS, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374

FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT

www.broward.org/recordstaxestreasury

BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION

DATE: January 2nd, 2019
PROPERTY ID # 514223-BC-2260 (TD # 41787)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

JULIOS KOSTA
73 LUNAU LANE
THORNHILL, ONTARIO L3T5H1
CANADA

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AMOUNTS SHOWN BELOW ARE ESTIMATED AMOUNTS DUE WHICH MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING ANY PAYMENT TO REDEEM UNPAID TAXES AND REMOVE THE PROPERTY FROM AUCTION.

MAKE CASHIER'S CHECK OR
MONEY ORDER PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

* Estimated Amount due if paid by January 31, 2019\$17,663.15

Or

* Estimated Amount due if paid by February 19, 2019\$17,891.40

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TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORDS, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374

FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT

www.broward.org/recordstaxestreasury

BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION

DATE: January 2nd, 2019

PROPERTY ID # 514223-BC-2260 (TD # 41787)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

LISA KOSTA
600 PARKVIEW DRIVE, APT. 921
HALLANDALE, FL 33009

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THORNHILL, ONTARIO L3T5H1
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ATCF II FLORIDA-A LLC
P.O. BOX 54972
NEW ORLEANS, LA 70154

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CITY OF HALLANDALE BEACH
ATTN CITY ATTORNEY
400 S FEDERAL HIGHWAY 2ND FLR
HALLANDALE BEACH, FL 33009

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CITY OF HALLANDALE BEACH
ATTN CRA DEPT
400 S FEDERAL HWY
HALLANDALE BEACH, FL 33009

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CONCEPTS CONSTRUCTION
3200 N. OCEAN DR #102
HOLLYWOOD, FL 33019

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GEORGE FRANK MUTLOS, REGISTERED AGENT O/B/O THE TOWERS OF OCEANVIEW
MASTER ASSOCIATION, INC.
400 LESLIE DR. #625
HALLANDALE BEACH, FL 33009

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RHONDA HOLLANDER, ESQ., REGISTERED AGENT O/B/O THE TOWERS OF OCEANVIEW
SOUTH CONDOMINIUM ASSOCIATION, INC.
314 S. FEDERAL HIGHWAY
DANIA BEACH, FL 33004

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SOUTHERN CHUTE INC
3772 SW 30 AVE
FT. LAUDERDALE 33312

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THE TOWERS OF OCEANVIEW MASTER ASSOCIATION, INC., T.O.V. MASTER
ASSOCIATION, INC.
500 LESLIE DRIVE
HALLANDALE BEACH, FL 33009

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600 PARKVIEW DR OFFICE
HALLANDALE, FL 33009

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UNIQUE SURETY AND INSURANCE SERVICES, LLC
3801 PGA BLVD., SUITE 600
PALM BEACH GARDENS, FL 33410

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 600 PARKVIEW DR, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

FLA. STATUTES MAY REQUIRE US TO NOTIFY OTHER PROPERTY OWNERS WHO LIVE AROUND THE PROPERTY SCHEDULED FOR SALE. IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN THIS PROPERTY, PLEASE DISREGARD THIS NOTICE.

PAYMENT MUST BE MADE IN CASH, MONEY ORDER OR CASHIER'S CHECK; PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPTED.

AMOUNTS SHOWN BELOW ARE ESTIMATED AMOUNTS DUE WHICH MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING ANY PAYMENT TO REDEEM UNPAID TAXES AND REMOVE THE PROPERTY FROM AUCTION.

MAKE CASHIER'S CHECK OR
MONEY ORDER PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

* Estimated Amount due if paid by January 31, 2019\$17,663.15

Or

* Estimated Amount due if paid by February 19, 2019\$17,891.40

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON February 20, 2019 UNLESS ALL BACK TAXES ARE PAID PRIOR TO AUCTION.

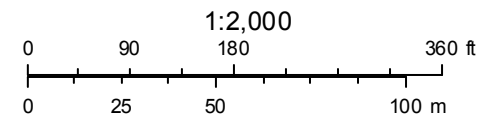
TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORDS, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374

FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT

www.broward.org/recordstaxestreasury



November 5, 2018



701A 1A30 0001 0961 531A

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\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postmark
Here

Postage

\$

Total Postage

\$

Sent To

Street and /

City, State, &

TD 41787 FEBRUARY 2019 WARNING
UNIQUE SURETY AND INSURANCE SERVICES, LLC
3801 PGA BLVD., SUITE 600
PALM BEACH GARDENS, FL 33410

See Reverse for Instructions

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Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postmark
Here

Postage

\$

Total

\$

Sent

Street

TD 41787 FEBRUARY 2019 WARNING
THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM
ASSOCIATION, INC.
600 PARKVIEW DR OFFICE
HALLANDALE, FL 33009

TOES T960 T000 DEPT RTD 01A 130 000 0961 5301

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TD 41787 FEBRUARY 2019 WARNING
THE TOWERS OF OCEANVIEW MASTER ASSOCIATION,
INC., T.O.V. MASTER ASSOCIATION, INC.
500 LESLIE DRIVE
HALLANDALE BEACH, FL 33009

See Reverse for Instructions

Postmark
Here

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/>	Return Receipt (hardcopy)	\$
<input type="checkbox"/>	Return Receipt (electronic)	\$
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$
<input type="checkbox"/>	Adult Signature Required	\$
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$

Postage

Total Postage \$

Sent To \$

Street and /

018 1830 0001 0961 5295

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CERTIFIED MAIL® RETURN RECEIPT
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Certified Mail Fee \$ _____
 Services & Fees (check box, add fee as appropriate) \$ _____
 (copy)

☐ Return Receipt (hardcopy) \$ _____
☐ Receipt (electronic) \$ _____
 and Delivery

☐ Return Receipt (electronic) \$ _____
☐ Return Receipt Restricted Delivery \$ _____

☐ Return to sender if undeliverable \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Signature Required and Delivery \$ _____

☐ Adult Signature Required Estimated Delivery \$ _____

11787 FEBRUARY 201

TD 41787 FEBRUARY 1964
SOUTHERN CHINA

30
\$
SOUTHERN
3772 SW 30 A

377237
FT. LAUDERDALE

FT. LAUDERDALE

Sent

Street

TD 41787 FEBRUARY 2019 WARNING
SOUTHERN CHUTE INC
3772 SW 30 AVE
FT. LAUDERDALE 33312

See Reverse for Instructions

7018 1830 0000 1000 0960 1225

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Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postmark
Here

Postage

\$

Total

\$

Sent

Street

City, State

TD 41787 FEBRUARY 2019 WARNING
RHONDA HOLLANDER, ESQ., REGISTERED AGENT O/B/C
THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM
ASSOCIATION, INC.
314 S. FEDERAL HIGHWAY
DANIA BEACH, FL 33004

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

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Total

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St

City, State, ZIP

TD 41787 FEBRUARY 2019 WARNING
GEORGE FRANK MUTLOS, REGISTERED AGENT O/B/O
THE TOWERS OF OCEANVIEW MASTER ASSOCIATION,
INC.
400 LESLIE DR. #625
HALLANDALE BEACH, FL 33009

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Extra Services & Fees (check box, add fee as appropriate)

- | | | |
|--|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postage

\$

Total

\$

Sent

Street

City,

Postmark
Here

TD 41787 FEBRUARY 2019 WARNING
CONCEPTS CONSTRUCTION
3200 N. OCEAN DR #102
HOLLYWOOD, FL 33019

0425 7960 0000 0961 5240
7018 1830 0000 0961 5240

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Extra Services & Fees (check box, add fee as appropriate)

- | | | |
|--|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postmark
Here

Postmark

\$

To

\$

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City, State, ZIP+4

TD 41787 FEBRUARY 2019 WARNING
CITY OF HALLANDALE BEACH
ATTN CRA DEPT
400 S FEDERAL HWY
HALLANDALE BEACH, FL 33009

7012 9102 0000 1000 0960 5225

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| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postmark
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City, State, ZIP+4

TD 41787 FEBRUARY 2019 WARNING
CITY OF HALLANDALE BEACH
ATTN CITY ATTORNEY
400 S FEDERAL HIGHWAY 2ND FLR
HALLANDALE BEACH, FL 33009

7018 1830 0001 0961 5226

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage

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Total Post

\$
Sent To

Street and

City, State

TD 41787 FEBRUARY 2019 WARNING
ATCF II FLORIDA-A LLC
P.O. BOX 54972
NEW ORLEANS, LA 70154

7018 1830 0001 0961 5219

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Certified Mail Fee	
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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage
\$
Total
\$
Sent
\$
Street
City, State, ZIP+4®

TD 41787 FEBRUARY 2019 WARNING
LISA KOSTA
73 LUNAU LANE
THORNHILL, ONTARIO L3T5H1
CANADA

7018 1830 0001 0961 5202

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Certified Mail Fee \$ _____
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- Extra Services & Fees (check box, add fee as appropriate)**
- ☐ Return Receipt (hardcopy) \$ _____
 - ☐ Certified Mail (electronic) \$ _____
 - ☐ Adult Signature Restricted Delivery \$ _____
 - ☐ Adult Signature Required \$ _____
 - ☐ Adult Signature Restricted Delivery \$ _____

Postage

TD 41787

Postmark
Here

600 PARKVIEW DRIVE, APT. 921
HALLANDALE, FL 33009

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery

Postage \$

Total \$

Postmark
Here

TD 41787 FEBRUARY 2019 WARNING

JULIOS KOSTA
73 LUNAU LANE
THORNHILL, ONTARIO L3T5H1
CANADA

City, St
Street

1830 0001 0961 5196
2018 818

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage \$
Sent To
Street and
City, State,
Postmark Here

TD 41787 FEBRUARY 2019 WARNING
JULIOS KOSTA
600 PARKVIEW DRIVE, APT. 921
HALLANDALE, FL 33009

PS Form 3800, April 2015 PSN 7530-02-000-9047

6975 1960 0000 DEPT 9702

Registered No.

Date Stamp

To Be Completed
By Post Office

Postage \$

Extra Services & Fees

☐ Registered Mail \$

☐ Return Receipt
(hardcopy) \$

☐ Return Receipt
(electronic) \$

☐ Restricted Delivery \$

Extra Services & Fees
(continued)

☐ Signature Confirmation

\$

☐ Signature Confirmation
Restricted Delivery

\$

Total Postage & Fees

\$

Customer Must Declare
Full Value

\$

Received by

Domestic Insurance up to \$50,000
is included based upon the
declared value. International
Indemnity is limited. (See Reverse).

To Be Completed By Customer
(Please Print)
All Entries Must Be in Ballpoint or Typed

FROM

TO

RECORDS TAXES & TREASURY
TAX DEED SECTION
115 S. ANDREWS AVE RM A-100
FT. LAUDERDALE, FL 33301

TD 41787 FEBRUARY 2019 WARNING
JULIOS KOSTA
73 LUNAU LANE
THORNHILL, ONTARIO L3T5H1
CANADA

PS Form 3800

April 2015 PSN 7530-02-000-9051

1 - Customer

(See Information on Reverse)

Registered No.

Date Stamp

To Be Completed
By Post Office

Postage \$

Extra Services & Fees

☐ Registered Mail \$

☐ Return Receipt
(hardcopy) \$

☐ Return Receipt
(electronic) \$

☐ Restricted Delivery \$

Extra Services & Fees
(continued)

☐ Signature Confirmation
\$

☐ Signature Confirmation
Restricted Delivery
\$

Total Postage & Fees

\$

Customer Must Declare
Full Value

\$

Received by

Domestic Insurance up to \$50,000
is included based upon the
declared value. International
Indemnity is limited. (See Reverse).

To Be Completed By Customer
(Please Print)
All Entries Must Be in Ballpoint or Typed

FROM

TO

**RECORDS TAXES & TREASURY
TAX DEED SECTION
115 S. ANDREWS AVE RM A-100
FT. LAUDERDALE, FL 33301**

**TD 41821 FEBRUARY 2019 WARNING
RENE CLAUDE MARION
514 DE BRUYERE
REPENTIGNY, QUEBEC J5Y 3Y9
CANADA**

Registered No.

Date Stamp

To Be Completed
By Post Office

Postage \$	Extra Services & Fees (continued)
Extra Services & Fees	<input type="checkbox"/> Signature Confirmation \$
<input type="checkbox"/> Registered Mail \$	<input type="checkbox"/> Signature Confirmation Restricted Delivery \$
<input type="checkbox"/> Return Receipt (hardcopy) \$	Total Postage & Fees \$
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Restricted Delivery \$	
Customer Must Declare Full Value \$	Received by

Domestic Insurance up to \$50,000
is included based upon the
declared value. International
Indemnity is limited. (See Reverse).

OFFICIAL USE

To Be Completed By Customer
(Please Print)
All Entries Must Be in Ballpoint or Typed

FROM	
TO	

RECORDS TAXES & TREASURY
TAX DEED SECTION
115 S. ANDREWS AVE RM A-100
FT. LAUDERDALE, FL 33301

TD 41821 FEBRUARY 2019 WARNING
MANON DAIGNEAULT
514 DE BRUYERE
*REPENTIGNY, QUEBEC J5Y 3Y9
CANADA

PS Form 380

April 2015. PSN 7530-02-000-9051

1 - Customer
on Reverse)

Registered No.

Date Stamp

To Be Completed
By Post Office

Postage \$	Extra Services & Fees (continued)
Extra Services & Fees	<input type="checkbox"/> Signature Confirmation
<input type="checkbox"/> Registered Mail \$	\$
<input type="checkbox"/> Return Receipt (hardcopy) \$	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Return Receipt (electronic) \$	\$
<input type="checkbox"/> Restricted Delivery \$	Total Postage & Fees
	\$

Customer Must Declare
Full Value
\$

Received by

Domestic Insurance up to \$50,000
is included based upon the
declared value. International
Indemnity is limited. (See Reverse).

To Be Completed By Customer
(Please Print)
All Entries Must Be in Ballpoint or Typed

FROM	
TO	

**RECORDS TAXES & TREASURY
TAX DEED SECTION
115 S. ANDREWS AVE RM A-100
FT. LAUDERDALE, FL 33301**

**TD 41787 FEBRUARY 2019 WARNING
LISA KOSTA
73 LUNAU LANE
THORNHILL, ONTARIO L3T5H1
CANADA**

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 41787 FEBRUARY 2019 WARNING
CITY OF HALLANDALE BEACH
ATTN CRA DEPT
400 S FEDERAL HWY
HALLANDALE BEACH, FL 33009



9590 9402 3236 7196 0471 56

2. Article Number (Transfer from service label)

7018 1830 0001 0961 5240

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Linsey Janiszek

C. Date of Delivery

1/19

D. Is delivery address different from item 1?
If YES, enter delivery address below:

- ☐ Yes
☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 41787 FEBRUARY 2019 WARNING
RHONDA HOLLANDER, ESQ., REGISTERED AGENT O/B/O
THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM
ASSOCIATION, INC.
314 S. FEDERAL HIGHWAY
DANIA BEACH, FL 33004



9590 9402 3236 7196 0471 32

2. Article Number (Transfer from service label)

7018 1830 0001 0961 5271

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- ☐ Agent
- ☒ Addressee

B. Received by (Printed Name)

[Handwritten: Carina Taylor]

C. Date of Delivery

[Handwritten: 1-10-19]

D. Is delivery address different from item 1? If YES, enter delivery address below:

- ☐ Yes
- ☒ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article</p> <p>TD 41787 FEBRUARY 2019 WARNING SOUTHERN CHUTE INC 3772 SW 30 AVE FT. LAUDERDALE 33312</p>		<p>B. Received by (Printed Name) Peter Alonso</p> <p>C. Date of Delivery 1-9</p>	
<p>2. (Transfer from service label)</p> <p>7018 1830 0001 0961 5288</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

TD 41787 FEBRUARY 2019 WARNING
UNIQUE SURETY AND INSURANCE SERVICES, LLC
3801 PGA BLVD., SUITE 600
PALM BEACH GARDENS, FL 33410



9590 9402 3236 7196 0468 21

7018 1830 0001 0961 5318

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Mail
Mail Restricted Delivery

(over 500)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

TD 41787 FEBRUARY 2019 WARNING
LISA KOSTA
600 PARKVIEW DRIVE, APT. 921
HALLANDALE, FL 33009



9590 9402 4397 8248 8404 18

2. Article Number (Transfer from service label)

7018 1830 0001 0961 5202

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

[Handwritten Name]

C. Date of Delivery

[Handwritten Date]

D. Is delivery address different from item 1?
If YES, enter delivery address below:

- ☐ Yes
☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

TD 41787 FEBRUARY 2019 WARNING
THE TOWERS OF OCEANVIEW MASTER ASSOCIATION
INC., T.O.V. MASTER ASSOCIATION, INC.
500 LESLIE DRIVE
HALLANDALE BEACH, FL 33009



9590 9402 3236 7196 0474 39

2.

7018 1830 0001 0961 5295

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

John Ricc

C. Date of Delivery

D. Is delivery address different from item 1? ☒ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Delivery Restricted Delivery

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

(over \$500)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 41787 FEBRUARY 2019 WARNING
GEORGE FRANK MUTLOS, REGISTERED AGENT O/B/O
THE TOWERS OF OCEANVIEW MASTER ASSOCIATION,
INC.
400 LESLIE DR. #625
HALLANDALE BEACH, FL 33009



9590 9402 3236 7196 0471 01

Article Number (Transfer from sending label)

7018 1830 0001 0961 5264

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

GEORGE F MUTLOS

C. Date of Delivery

1-18-19

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail Restricted Delivery | |

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>TD 41787 FEBRUARY 2019 WARNING THE TOWERS OF OCEANVIEW SOUTH CONDOMINIUM ASSOCIATION, INC. 600 PARKVIEW DR OFFICE HALLANDALE, FL 33009</p>		<p>B. Received by (Printed Name) C. Date of Delivery 1/9/19</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7018 1830 0001 0961 5301</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 41787 FEBRUARY 2019 WARNING
JULIOS KOSTA
600 PARKVIEW DRIVE, APT. 921
HALLANDALE, FL 33009



9590 9402 4397 8248 8404 32

2

7018 1830 0001 0961 5189

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

[Handwritten Signature]

C. Date of Delivery

1/10/2019

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery
- ☐ Restricted Delivery

(over 3000)