

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 PM 2:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **625673** (9)  
1. Corporation Name  
**BEECH MOUNTAIN PROPERTIES, INC.**

Principal Place of Business Mailing Address  
**2701 S BAYSHORE DR #PH  
COCONUT GROVE FL 33133** **2701 S BAYSHORE DR #PH  
COCONUT GROVE FL 33133**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/13/1979** 3a. Date of Last Report **03/15/1994**

4. FEI Number **59-1916344** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of Now Registered Agent

**ROTHSTEIN, LAWRENCE  
2701 S. BAYSHORE DR., PENTHOUSE  
MIAMI FL 33133**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of registration

(Print) Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP**  
NAME **WIENER, MAURICE**  
STREET ADDRESS **2701 S BAYSHORE DRIVE**  
CITY, ST, ZIP **COCONUT GROVE FL**

TITLE **DVP**  
NAME **ROTHSTEIN, LAWRENCE**  
STREET ADDRESS **2701 S BAYSHORE DR**  
CITY, ST, ZIP **COCONUT GROVE FL**

TITLE **DVP**  
NAME **GRAY, LEE**  
STREET ADDRESS **2701 S BAYSHORE DRIVE**  
CITY, ST, ZIP **COCONUT GROVE FL**

TITLE **VSC**  
NAME **CAMAROTTI, CARLOS**  
STREET ADDRESS **2701 S. BAYSHORE DR.**  
CITY, ST, ZIP **COCONUT GROVE FL**

TITLE **AS**  
NAME **CRANK, KEITH W.**  
STREET ADDRESS **2701 S BAYSHORE DR**  
CITY, ST, ZIP **COCONUT GROVE FL**

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY, ST, ZIP

21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY, ST, ZIP

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY, ST, ZIP

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY, ST, ZIP

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY, ST, ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(9)(b), Florida Statutes. I further certify that the information submitted on this annual report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registrar or the law enforcement officer who made the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with this filing.

SIGNATURE: **Carlos Camarotti**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/27/95** **305 854 6803**  
Date Telephone Number