707581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

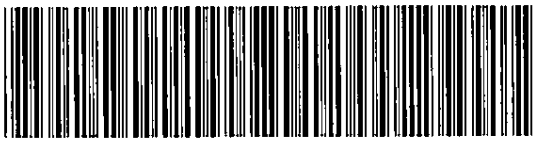
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100446875631

NP # 7581

BISCAYNE LAKE GARDENS
BUILDING "J", INC.

NP
7581

NEW

FILED IN OFFICE OF SECRETARY
OF STATE, STATE OF FLORIDA,
by. . . BT. . ., on. JULY 14, 1964

TOM ADAMS
SECRETARY OF STATE

COMP-1

Office of the

Secretary of State

State of Florida

Tallahassee

TOM ADAMS
SECRETARY OF STATE

July 15, 1964

In reply refer to:
corp-nonprofit-eb

NPL 7581

Mr. B. Barry Kassin
BISCAYNE LAKE GARDENS
20301 Biscayne Boulevard
Miami, Florida

Dear Mr. Kassin:

BISCAYNE LAKE GARDENS BUILDING "J", INC.,

a corporation not for profit, has filed documents as indicated on July 14, 1964.

X Check in the amount of $ 11.
X New Articles of Incorporation
___ Articles of Incorporation from a Circuit Court with affidavit.
___ Articles of Reincorporation.
___ Amending Articles of Incorporation of record in this office.
___ Amending Articles of Incorporation from a Circuit Court.
___ Articles of Merger or Consolidation.
___ Certificate of Dissolution.
___ Petition for change of status to or from a corporation not for profit, and new Articles of Incorporation.
___ Resident Agent Certificate.
X Resident Agent form enclosed (to be completed and returned for filing) with $1 filing fee.
___ Corporation report due July 1 of each year.
X Enclosures or details of filing:

Certified copy.

It is the pleasure of this office to promptly acknowledge the filing of your charter.

Sincerely,

TOM ADAMS
Secretary of State

By (Mrs.) Althea [redacted]
Corporations Division
Nonprofit Supervisor

TA/eb

corp-5
1-10-63

[redacted] ifications of members and the manner of

Biscayne Lake GARDENS
20301 BISCAYNE BOULEVARD MIAMI, FLORIDA · PHONE 949 0642

July 10, 1964

Secretary of State
Tallahassee, Florida

Gentlemen:

Enclosed herewith please find for filing in your office certificates of incorporation for BISCAYNE LAKE GARDENS BUILDING "B", INC. and BISCAYNE LAKE GARDENS BUILDING "J", INC. both being non-profit corporations. Also enclosed please find two checks each in the sum of $11.00 for filing fees.

Thank you for your co-operation.

Very truly yours,

B Barry Kaplan

BBK/hs
Encls.(4)

COPY

CB
AA

[redacted]

CERTIFICATE OF INCORPORATION

of

BISCAYNE LAKE GARDENS BUILDING "J" , INC.

We, the undersigned subscribers, for the purposes hereinafter specifically set forth, have heretofore and herewith associated and joined together, and do hereby agree to form a corporation not for profit under Chapter 617 of the Florida Statutes, under the covenants and conditions hereinafter set forth.

1. The name of the corporation shall be:

BISCAYNE LAKE GARDENS BUILDING "J" INC.

Its principal office shall be located in Miami, Dade County, Florida.

2. The purposes for which the corporation is organized are as follows:

A. To purchase, operate and manage a co-operative apartment housing project on a non-profit basis and in the interest and for the housing of its members and other lawful occupants.

B. To construct, operate, maintain and improve, and to sell, convey, assign, mortgage or lease any real estate and any personal property necessary to the operation of such a project.

C. To borrow money and issue evidence of indebtedness in furtherance of any and all of the objects of its business; to secure the same by mortgage, deeds of trust, pledge, or other lien; or the assumption therof.

D. To enter into, make, perform and execute contracts, deeds, leases and agreements of every kind and description, necessary to, or in connection with, or incidental to the furtherance and accomplishment of any one or more of the purposes of the Corporation.

E. The corporation shall be authorized to exercise and enjoy all of the powers, rights and privileges granted to or conferred upon corporations of a similar character by the Statutes of the State of Florida relating to domestic corporations not for profit, and to do any and all things hereinbefore set forth to the same extent as natural persons might or could do.

3. The qualifications of memebers and the manner of their admission shall be as follows:

The members of this corporation shall be the persons, firms or corporations with whom the corporation has or shall enter into a proprietary lease of one or more apartments in the Biscayne Lake Gardens Building "J" 20301 Biscayne Boulevard, Miami, Dade County, Florida. Each apartment unit shall constitute a single membership. The total number of memberships shall be thirty-six (36) with joint tenants, tenants by the entireties, and tenants in common of any proprietary lease being collectively entitled to one membership.

Any assignee of a lessee's interest in the apartment lease whose application for membership in this corporation is accepted by the corporation shall be substituted as a member of this corporation in the place of the assignor of such interest.

In the event of cancellation of any proprietary lease pursuant to the terms thereof, or in the event of the removal of the lessee or of persons claiming by, through or under the lessees by virtue of an action for "forcible entry and detainer," or by virtue of a "landlord- tenant" proceeding, the membership of the person who would otherwise have been a member by virtue of rights under such proprietary lease shall cease and terminate.

Any member more than thirty (30) days past due in the payment of assessments, charges, dues or fees payable under the terms of the proprietary lease orotherwise due by virtue of said membership shall not be entitled to vote at any meeting of the membership of the corporation.

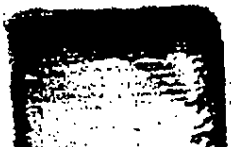
All transfers of membership shall be upon such terms and conditions as shall be contained in the by-laws, not inconsistent with proprietary lease.

All proprietary leases shall be of a standard form to be adopted by the Board of Directors at its first meeting and shall differ only in the following respects: date of commencement of lease, consideration, and proportionate share of total assessments to be borne by lessee. The proportionate share of total assessments shall be as hereinafter provided in this charter, and the same may not be changed except upon amendment of this charter in the manner provided for herein.

Additional conditions and regulations of membership and the rights and other privileges of the classes of members shall be determined and fixed by the by-laws of this corporation.

4. Term of Existance: This corporation is to have perpetual existance.

5. Subscribers: The names and residence addresses of the subscribers to this charter are set forth at the end hereof.



6. Management:

A. The officers of the corporation shall be as follows; A President, one or more Vice -Presidents, a Secretary and a Treasurer. The officers hereinafter named shall serve until their successors are elected. All officers shall serve at the pleasure of the Board of Directors.

B. Directors.

1. The management of the affairs of the corporation shall be conducted by a board of directors in accordance with provisions of its by-laws. The number of directors shall be an uneven number, not less than 3 nor more than 7, and as further fixed by the by-laws. The first board of directors shall have power and authority to make and adopt the original by-laws of the corporation; in conformity herewith, insofar as applicable, thereafter the power and authority to make, alter or amend the by-laws shall vest in the membership on such terms as shall be expressly stated in the by-laws.

2. The original directors who shall serve until the first meeting of the members subsequent to the acquisition of the building to be owned by the corporation and the first officers of the corporation who shall serve until their successors are elected by the board of directors, and the addresses of such directors, are as follows:

Name	Office	Address
B.Barry Kassin	Director & President	2510 N.E.215 St Miami, Florida
DON D'ARCY	Director & Vice President	18460 N.E.23 Ct. Miami, Florida
DIANE D'ARCY	Director & Treasurer	18460 N.E.23 Ct. Miami, Florida
GERTRUDE KASSIN	Director & Secretary	2510 N.E.215 St Miami, Florida
GEORGE J. DOOLEY	Director	1015 S.W. 11 Ave, Hallandale, Fla

7. Amendment of Charter:

The corporation reserves the right to amend, alter, change or repeal provisions contained in this certificate of Incorporation , in the manner now or hereafter prescribed by statute, and all rights conferred upon members herein are granted subject to this reservation; it being provided however, that said reserve right to amend, alter, change or repeal may be exercised only with the approval of three-fourths of the entire membership obtained at a meeting called for the purpose, and it being further provided however that this Certificate of Incorporation may not be amended, altered or changed in any respect which shall change voting rights of members, proportionate liability for assessments, and proportionate rights to proceeds of sale of corporate assets, except by unanimous approval of the entire membership obtained by written consent or at

a meeting called for such purpose.

8. Miscellaneous Provisions:

A. The corporation may, through its board of directors, in addition to all other powers hereinbefore granted under the law to corporations not for profit, appoint, employ agents and servants of any nature to carry out any and all services necessary to the performance of the objects for which this corporation has been formed, and agrees to pay them a reasonable compensation for such services. No officers or director shall be entitled to compensation for acting as such.

B. No member shall ever be held liable or responsible for the contracts or faults of this corporation in any further sum than the unpaid balance of his annual dues or assessments, except where otherwise herein specifically provided or provided elsewhere by special contract or assumption of such liability.

IN WITNESS WHEREOF, we, the under signed, being the original subscribers to this Charter of Incorporation, do hereunto set our hands and seals this 30th day of June, 1964

Subscriber		Residing at
B Barry Kaplan	L.S.	2510 N.E. 215th St. Miami, Florida
Ann Dana	L.S.	1760 N.E. 123rd St. Miami
Irma Kinsey	L.S.	1946 N.E. 3rd Ave. Miami 36, Fla.
Gertrude Kaplan	L.S.	2510 N.E. 215 St. Miami Fla.
George J. Dooley	L.S.	1015 S.W. 11th Ave Hallandale Fla

STATE OF FLORIDA)
COUNTY OF DADE) ss:

Before me, the undersigned authority duly authorized to take acknowledgments and administer oaths, personally appeared B.BARRY BASSIN, ANN BIAGGI, DIANE BIAGGI, GERTRUDE BASSIN, GEORGE J. DOOLEY,who, after being duly cautioned and sworn, deposes and say that they are all of the subscribers to the above and foregoing Charter of BISCAYNE LAKE GARDENS BUILDING ,INC., and that said CHARTER is intended in good faith to carry out the purposes and objects set forth therein.

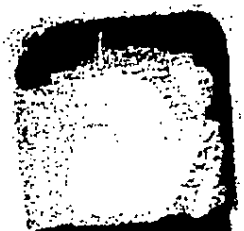
IN WITNESS WHEREOF, I have hereunto set my hand and seal at MIAMI, Dade County, Florida, this 30th day of June ,1964.

EXHIBIT A

SCHEDULE OF PROPORTIONATE SHARES OF ASSESSMENTS ETC.

TOTAL UNITS: 36 consisting of 30 one bedroom units and 6 two bedroom units.

RATIO:		
	Each one bedroom unit	.2653%
	Each two bedroom unit	.3405%



Corporation Report
for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 608.32(2), Florida Statutes)

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

Refer to This Number in All Correspondence

1967 JUL 14 PM

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NP-7581

(a.c.)

BISCAYNE LAKE GARDENS BLDG J INC
B BARRY KASSIN
2800 N E 203 ST
MIAMI FLA 33160

23-08-NP-707581 1967

1. BISCAYNE LAKE GARDENS BUILDING "J" INC. (Give exact name of corporation) | (General nature of business or activity) 2. CO-OP- REAL EST.

3. 20301 BISCAYNE BLVD (Street or Post Office Box of principal place of business) MIAMI (City) DADE (County) FLORIDA (State)

4. a. B. BARRY KASSIN (Officers-Name) PRES (Title) 2800 N. E 203 ST. MIAMI (Address)
b. DON D'ARCY V. PRES. & SECRETARY 18460 N.E 23 CT. MIAMI
c. DIANE D'ARCY TREAS "
d. GERTRUDE KASSIN ASST. SEC 2800 N. E 203 ST. MIAMI
e.
f.
g.

5. a. B. BARRY KASSIN (Directors - Name) (Law requires at least (3) three) 2800 N.E 203 MIAMI (Address)
b. GERTRUDE KASSIN "
c. DON D'ARCY 18460 N.E 23 CT. MIAMI
d. DIANE D'ARCY "
e. MARVEL DOOLEY 1015 S.W. 11TH AVE, HALLANDALE
f.

6. B. BARRY KASSIN (Resident Agent Name) 20301 BISCAYNE BLVD MIAMI (Address)

Insurance companies are not to complete item 8 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors 4 27 67 (Month - Day - Year) 8. Corporation Active? YES (Yes or No) 9. If inactive, inactivity began (Month - Day - Year)

10. If inactive, will corporation begin business in the future? (Yes or No) 11. Date Incorporated 7 14 67 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business.

14. We, the undersigned, certify the above statemen facts to be true and correct as shown by our books.

B. Barry Kassin
By President or V-President

Attest: Don D'Arcy
Secretary

STATE OF FLORIDA
COUNTY OF DADE

Personally appeared before me B. BARRY KASSIN who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 26 day of June 1967

(Notary Seal)

Signature of Notary taking acknowledgment

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JAN. 19, 1971
BONDED THROUGH FRED W. DIESTELHORST

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

COPY AO 4 67

ORIGINAL

CORPORATION NOT FOR PROFIT

No. NP- 7581-A

Resident Agent Certificate

NAME

BISCAYNE LAKE GARDENS
BUILDING "J" INC.

FILED IN THE OFFICE OF
SECRETARY OF STATE
OF FLORIDA

JULY 21, 1964
TOM ADAMS
SECRETARY OF STATE

BY BT

corp-31

$1 FILING FEE NOT PAID-CHARTER FILED-JULY 14, 1964. cb

STATE OF FLORIDA

OFFICE

SECRETARY OF STATE

CORPORATION NOT FOR PROFIT

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served

JL 20-64--2 54400 *****1.00

In pursuance of Section 617.023, Florida Statutes, the following is submitted, in compliance with said Act:

First—That BISCAYNE LAKE GARDENS BUILDING "J" INC.,

a corporation not for profit duly organized and existing under the laws of the State of Florida

with its principal place of business at City of Miami

County of Dade, State of Florida

has designated and established 20301 No. Federal Highway
(Street or building)

City of Miami, County of Dade

State of Florida, as its place of business or domicile for the service of process within this State, and named as its agents B. BARRY KASSIN

to accept service of process.

Complete the following when there is a change of one or more officers or directors.

OFFICERS: NAME	AFFIX TITLES:	SPECIFIC ADDRESS

RECEIVED
JUL 21 11 10 AM '64
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIRECTORS: (THREE (3) required by law) NAME	SPECIFIC ADDRESS

By B. Barry Kassin
President

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity.

By B. Barry Kassin
Resident Agent

Section 617.023, Florida Statutes, Office and resident agent. Every corporation organized hereunder shall maintain an office in this state with a resident agent thereat upon whom process may be served. The resident agent may be either an individual or a corporation. The corporation shall keep the secretary of state informed of the current

592 RV-2

POSTMASTER
Check Boxes for Non-Delivery
( ) Moved, left no address
( ) Out of business
( ) No such address
( ) Unknown
( ) Closed for season
( ) Refused
RETURN REQUESTED

Corporation Report for Foreign and Domestic Corporations

(Not For Profit and Exempt Section 617.02(2), Florida Statutes)

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

BULK RATE
U. S. POSTAGE
PAID
Tallahassee, Fla.
Permit No. 88

Refer to This Number in All Correspondence: 23-08-NP-707561

RECEIVED
1965 AUG 10 PM 5:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BISCAYNE LAKE GARDENS BUILDING J INC
% B BARRY KASSIN PRESIDENT
[redacted] 2800 N.E.203 St
MIAMI FLA 33160 ( ) INSERT ZIP CODE IF NOT SHOWN

AG

1. BISCAYNE LAKE GARDENS BUILDING "J" INC. (Give exact name of corporation)
2. co-op (General nature of business or activity)
3. 20301 No. Federal Highway (Street or Post Office Box of principal place of business) Miami (City) Dade (County) Florida (State)
4. a. B. BARRY KASSIN (Officer's Name) Pres. (Title) 2800 N.E.203 St.Miami,Fla. (Address)
   b. DIANE D'ARCY — Treas. — 18460 N.E.23 Ct.Miami, Fla.
   c. DON D'ARCY — Vice-Pres. — 18460 N.E. 23 Ct.Miami, Fla.
   d. GERTRUDE KASSIN — Sec. — 2800 N.E. 203 St.Miami, Fla.
   e.
   f.
   g.
5. a. B. BARRY KASSIN (Directors - Name) (Law requires at least (3) three) 2800 N.E. 203 St. Miami, Fla. (Address)
   b. DON D'ARCY — 18460 N.E. 23 Ct.Miami, Fla.
   c. DIANE D'ARCY — 18460 N.E. 23 Ct. Miami, Fla.
   d. Gertrude Kassin — 2800 N.E. 203 St.Miami, Fla.
   e.
   f.
6. P. BARRY KASSIN (Resident Agent Name) 2800 N.E. 203 St.Miami, Florida (Address)
   I hereby acknowledge acceptance of the appointment as resident agent upon whom service of process may be made. B Barry Kassin (Signature of resident agent)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors May 15 1965 (Month - Day - Year)
8. Corporation Active? Yes (Yes or No)
9. If inactive, inactivity began (Month - Day - Year)
10. If inactive, will corporation begin business in the future? (Yes or No)
11. Date Incorporated 7/14/64 (Month - Day - Year)
12. If foreign corporation, Date Qualified in Fla (Month - Day - Year)
13. If foreign corporation, give the number of States in which you do business
14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

B Barry Kassin
By President or V-President

Attest: Gertrude Kassin
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me B. BARRY KASSIN who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 14 day of August 1965.

(Notary Seal)

Signature of Notary taking acknowledgment

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

Corporation Report
for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 608.32(2), Florida Statutes)

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

Refer to This Number In All Correspondence

BISCAYNE LAKE GARDENS BLDG 5 INC
2081 BISCAYNE BLVD
MIAMI FLA 33160

33-08-NP-707881 1968

1. Biscayne Lake Garden Building J Corporation
(Give exact name of corporation)

2. (General nature of business or activity) Apartment House

3. 20200 N.E. 27 Ct. N. Miami, Florida 33160 Dade Florida
(Street or Post Office Box of principal place of business) (City) (County) (State)

	(Officers-Name)	(Title)	(Address)
4. a.	Mike Ascensi	President	20200 N.E. 27 Ct. N.Miami, Fla.
b.	Ben Novak	Vice President	20200 N.E. 27 Ct. N.Miami, Fla.
c.	Ben Janon	Sec.-Treasurer	20200 N.E. 27 Ct. N.Miami, Fla.
d.	Henry Steege		20200 N.E. 27 Ct. N.Miami, Fla.
e.	Mose Weiner		20200 N.E. 27 C. N.Miami, Fla.
f.			
g.			

5. a. Mike Ascensi, Ben Novak, Ben Janon 20200 N.E. 27 Ct. N.Miami, Fla.
(Directors - Name) (Law requires at least (3) three) (Address)
b.
c.
d.
e.
f.

6. Harry Kassin Biscayne Blvd. & 203 St., N. Miami, Fla.
(Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors May 6, 1968 (Month - Day - Year) 8. Corporation Active? Yes (Yes or No) 9. If inactive inactivity began ______ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ______ (Yes or No) 11. Date Incorporated Jan. 1, 1968 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business. ______

14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Michael Ascensi
By President or V. President

Attest: Ben Janon
Secretary

STATE OF Florida
COUNTY OF Dade.

Personally appeared before me ______
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 2nd day of July 1968

(Seal)

Signature of Notary taking acknowledgment

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

corp-32

NP # 7581

BISCAYNE LAKE GARDENS BUILDING "J" INC.

(x) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: JULY 14, 1964

By: B. Barry Kassin, Biscayne Lake Gardens, 20301 Biscayne Blvd., Miami, Fla.

(a) Resident agent certificate, Filed July 21, 1964.
(b) Non-profit Corp. Rpt Fil Aug. 18, 1965
DISSOLVED BY PROCLAMATION 10/21/1974
(c) Reinstated 6/30/76

7-6-76

707581

LAW OFFICES

CABLE "BEPOL"

Becker & Poliakoff, P.A.

FILED
JUN 30 8 00 AM 1976
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ALAN S. BECKER
GARY A. POLIAKOFF
PETER S. SACHS
JEFFREY E. STREITFELD
GEORGE L. PLATT
STUART R. HOFFMAN
STEPHEN N. LIPTON
DEBORAH BOVARNICK

ROOSEVELT BUILDING
ARTHUR GODFREY ROAD
4014 CHASE AVENUE - SUITE 211
MIAMI BEACH, FLORIDA 33140

MIAMI (305) 538-3606
BROWARD 525-7148

FORTY HUNDRED BUILDING
4000 NORTH STATE ROAD 7
SUITE 212
FT. LAUDERDALE, FLA. 33319
FT. LAUDERDALE 739-7540

REPLY TO: Miami Beach

JUN 30 - 1 - 32[illegible] *****5.00

JUN 30 - 2 - 32[illegible] *****15.00

June 28, 1976

Department of State
Division of Corporations
The Capitol
Tallahassee, Florida 32304

Re: Biscayne Lake Gardens Condominium No. 1, Inc.
Biscayne Lake Gardens Condominium No. 3, Inc.
Biscayne Lake Gardens Building "J" Inc.

Gentlemen:

Enclosed herewith please find Corporation Annual Reports for the above-captioned corporations to reinstate said corporations. Attached to each Annual Report is a check representing the reinstatement fee, the fee for a certificate of reinstatement and $5.00 for each year in which an Annual Report has not been filed.

Upon reinstatement, please forward the certificates of reinstatement directly to this office.

Your cooperation is greatly appreciated.

Very truly yours,

BECKER & POLIAKOFF, P.A.
Attorneys At Law

STUART R. HOFFMAN
FOR THE FIRM

C.C.
REINSTATEMENT
Fee in lieu of CST
Reinstatement Filing Fee 15
72 Privilege Tax 5
73 Annual Report 5
74 Annual Report 5
75 Annual Report 5
TOTAL 40
BAL DUE

SRH:blw
Enclosures

ANNUAL FILING FEES
$5.00 PROFIT CORP.
$5.00—NON-PROFIT CORP.

CORPORATION ANNUAL REPORT

DUE—JAN. 1 DELINQUENT—JULY 1

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

REMIT THIS FORM & FILING FEE TO:

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
THE CAPITOL
TALLAHASSEE, FLORIDA
32304

(1) 707581 CHARTER NUMBER

(2) 7/14/64 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA.

(3) SICC SEE ENVELOPE BACK 8699

(3a) CHANGE TO:

(4) FED. EMPLOYER ID. NO.

(4a) CHANGE TO:

YEAR OF LAST REPORT FILED IN THIS OFFICE: ~~1970~~ 1972

YEAR(S) THIS REPORT COVERS: 1973, 1974, 1975, 1976

(5) EXACT NAME: BISCAYNE LAKE GARDENS BUILDING "J" INC.

PLEASE READ INSTRUCTIONS ON BACK

JUN 1976 STATE FLORIDA

(6) STREET ADDRESS OF PRINCIPAL OFFICE. POST OFFICE BOX ALONE WILL NOT BE ACCEPTABLE

ADDRESS: 20200 N.E. 27th Court
Miami, Florida 33180

(6a) STREET ADDRESS CHANGE ****20.00

(7) REGISTERED AGENT AND STREET ADDRESS:
Joseph Drexler
2760 N.E. 203rd Street
Miami, Florida 33180

(7a) REGISTERED AGENT NAME CHANGE AND/OR ADDRESS CHANGE INCLUDE REGISTERED OFFICE ADDRESS

(8) TYPE CORRECTIONS IN SPACE PROVIDED BELOW. STRIKE THROUGH INCORRECT ENTRIES. CORRECTIONS MUST BE LEGIBLE

NAMES OF ALL OFFICERS AND DIRECTORS	STREET ADDRESS	CITY / STATE	TITLES MUST BE SHOWN	
George Bartlett	20200 N.E. 27th Court	Miami, Florida	Pres.	Dir.
Henry Werner	20200 N.E. 27th Court	Miami, Florida	V.P.	Dir.
Sylvia Gorenberg	20200 N.E. 27th Court	Miami, Florida	Sec/Tr.	Dir.

DO NOT WRITE IN THIS SPACE — FOR DIVISION USE ONLY

JK 7-6-76

I CERTIFY THAT I AM AN OFFICER OF THIS CORPORATION EMPOWERED TO EXECUTE THIS REPORT AS REQUIRED BY CHAPTER 607, FLORIDA STATUTES. I FURTHER CERTIFY THAT I UNDERSTAND MY SIGNATURE ON THIS REPORT SHALL HAVE THE SAME LEGAL EFFECT AS IF MADE UNDER OATH.

SIGNATURE: Henry Werner HENRY J WERNER

TITLE: Vice Pres + Director TEL. NO. 931-0742

DATE: June 24 1976

CORP-AR75

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

June 30, 1976

BRUCE A. SMATHERS
SECRETARY OF STATE

Stuart K. Hoffman, Esq.
4014 Chase Avenue - Suite 212
Miami Beach, FL 33140

Telephone Number:
904/488-3140

CHARTER NUMBER: 707581

SUBJECT: BISCAYNE LAKE GARDENS BUILDING "J" INC.

This will acknowledge receipt of the following:

XX 1. Check in the amount of $ 40.00

_____ 2. Articles of Incorporation filed

_____ 3. Amendment to Articles of Incorporation filed

_____ 4. Articles of Merger or Consolidation filed

_____ 5. Certificate of Withdrawal filed

_____ 6. Limited Partnership filed

_____ 7. Trademark Application filed

_____ 8. Application for qualification filed _____. It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for $5.

XX 9. Reinstatement filed JUNE 30, 1976

_____ 10. Dissolution filed

XX 11. Other: **You did not send in enough money to receive a reinstatement certificate.**

[redacted]

_____ 1. Certified Copy(ies)

_____ 2. Certificate(s) Under Seal

_____ 3. Photocopy(ies)

_____ 4. Other:

DIVISION OF CORPORATIONS

Corp. 100 (Corp. 2)
05/03/76

corp-32

NP # 7581

BISCAYNE LAKE GARDENS BUILDING "J" INC.

(X) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: JULY 14, 1964

By: B. Barry Kassin, Biscayne Lake Gardens, 20301 Biscayne Blvd., Miami, Fla.

(a) Resident agent certificate, Filed July 21, 1964.
(b) Non-profit Corp. Rpt Fil Aug. 18, 1965
DISSOLVED BY PROCLAMATION 10/21/1974
(c) Reinstated 6/30/76

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Bruce A. Smathers
Secretary of State
Form COR 620

CORPORATION ANNUAL REPORT

1977

THIS REPORT MUST BE ACCOMPANIED BY A $5 FEE.

APR 15 1 07 PM 1977
FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ *READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES* ◀

1. Name and Address of Corporation Principal Office:

707581 BISCAYNE LAKE GARDENS
BUILDING "J" INC.
20200 N.E. 27TH CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

4. Federal Employer Identification Number (FEIN)

5. Date of Last Report 1976

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Mr. George Bartlett	PRES	x	20200 N.E. 27TH CT.	MIAMI, FL.
Mr. Henry Werner	v. Pres	x	20200 N.E. 27TH CT.	MIAMI, FL.
Mrs. Sylvia Gorenberg	Se/ Tr	x	20200 N.E. 27TH CT.	MIAMI, FL.
Mr. Harry Alpern	v/pre	x	20200 N.E. 27TH CT.	MIAMI, FL.

7. Registered Agent Information

Name: DREXLER, JOSEPH
Street Address (Do NOT Use P.O. Box Number): 2760 N.E. 203RD ST.
City, State and Zip Code: MIAMI, FL. 33180

If you wish to change Registered Agent on this form, enter all new information here ▶

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

Typed Name of Signing Officer: GEORGE E BARTLETT
Title: PRESIDENT
Telephone Number: 931-6766
Signature: George E Bartlett
Date: March 14th 1977

THIS REPORT MUST BE ACCOMPANIED BY THE $5 FEE

THE FILING FEE FOR THE 1 78 ANNUAL REPORT IS $10

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT

1978

Bruce A. Smathers
Secretary of State

FILED

Jun 30 S 04 978

CORPORATION DIVISION
TALLAHASSEE, FLORIDA

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE - Form COR 620(1/

▶ *READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES* ◀

1 Name and Address of Corporation Principal Office

707581 BISCAYNE LAKE GARDENS
BUILDING "J", CORP.,INC.
20200 N.E. 27th.Ct.
Miami, Fl. 33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2 Enter Change of Address of Corporation Principal Office
P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3 Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
7-14-1964		1977

6 Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
BARTLETT, GEORGE	Pres.	X	20200 N.E. 27th.Ct.	Miami,Fl.33180
GOLDEN, LOUIS	V.PRES.		20200 N.E. 27th.Ct.	Miami,Fl.33180
GORENBERG, SYLVIA SEC. & TREAS.			20200 N.E. 27th. Ct.	Miami,Fl 33180

7 Registered Agent Information

Name: DREXLER, JOS.
Street Address (Do NOT Use P.O. Box Number): 2760 N.E. 203 St.
City, State and Zip Code: Miami, Fl. 33180

If you wish to change Registered Agent on this form, enter all new information here ▶

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

8 An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee shall be executed on behalf of the Corporation by the receiver or trustee

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

6-30-78

Typed Name of Signing Officer	Title	Telephone Number
BARTLETT, GEORGE	PRES.	931-6766

Signature: G. E. Bartlett

Date: 6-[illegible]-78

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

MAR 10-79 2 877****10.00

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

707581
BISCAYNE LAKE GARDENS BUILDING J INC
20200 N.E. 27TH CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

FILED
APR 10 1979
CORPORATIONS
TALLAHASSEE, FLORIDA
DIVISION OF

3. Date Incorporated or Qualified To Do Business in Florida: 7/19/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
BARTLETT, GEORGE	P/D	20200 N.E. 27TH CT.	MIAMI, FL.
GORDEN, LOUIS	V/D	20200 N.E. 27TH CT.	MIAMI, FL.
GOREMBERG SYLVIA, MRS	S/T	20200 N.E. 27TH CT.	MIAMI, FL.
PAUL, RUBIE MRS.	D	20200 NE 27 CT	MIAMI, FL.
HELPERN, HARRY, MR.	D	20200 NE 27 CT	MIAMI, FL.

7. Registered Agent Information

Name: OREXLER, JOSEPH

Street Address (Do NOT Use P.O. Box Number): 2760 N.E. 203RD ST.

City, State and Zip Code: MIAMI, FL. 33180

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

4/10

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer: George Bartlett

Title: Pres.

Telephone Number: 931-6766

Signature: G. E. Bartlett

Date: 1-19-1979

(Form COR 600 Rev. 10/75/78)

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED

APR 17 1 36 PM '80

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

707581
Biscayne Lake Gardens Bldg."J",Inc.
2760 N.E. 203 St.
No. Miami Beach, Fla.33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business In Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
1975	59-1235863	

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Mr. Geo, Bartlett	P/D	20200 N.E. 27 Ct.	N. Miami Bch.,Fla.
Mr. Louis Golden	V/P	20200 N.E. 27 Ct.	N. Miami Bch.,Fla.
Mrs. Sylvia Gorenberg	S/T	20200 N.E. 27 Ct.	N. Miami Bch., Fla.
Mr. Harry Alpern	D	20200 N.E. 27 Ct.	N. Miami Bch., Fla.
Mrs. Catherine Trahan	D	20200 N.E. 27 Ct.	N. Miami Bch., Fla.

7. Registered Agent Information

Name
Mr. Jos. Drexler

Street Address (Do NOT Use P.O. Box Number)
2760 N.E. 203 St.

City, State and Zip Code
No. Miami Bch., Fla. 33180

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3. 4-12-80

8. See signature restrictions under Instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
George Bartlett	Pres./ Director	931-6766

Signature: G. E. Bartlett | Date: 3/10/80

P07331 03-24-80 2 5 378 10.00

DO NOT WRITE IN THIS SPACE

(Form COR 620) Rev. 11/78/79

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1981

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
SEP 28 3 00 PM '81
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

► READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◄

1. Name and Address of Corporation, Principal Office

707581
BISCAYNE LAKE GARDENS BUILDING "J" INC
20200 N.W. 27TH CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4. Federal Employer Identification Number (FEI): 59-01235863

5. Date of Last Report: 04/17/1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
BARTLETT, GEORGE	P/D	20200 N.E. 27TH CT.	MIAMI, FL.
GOLDEN, LOUIS	V/D	20200 N.E. 27TH CT.	MIAMI, FL.
GORENBER, SYLVIA MRS	S/T	20200 N.E. 27TH CT.	MIAMI, FL.
~~PAUL, [illegible] MRS~~	D	~~20200 N.E. 27TH CT.~~	MIAMI, FL.
ALPERN, HARRY	D	20200 N.E. 27TH CT.	MIAMI, FL
Trahan, Catherine	D	20200 NE 207 Ct.	Miami, Fl.

Part I

Registered Agent Information

7. Current Agent

Name: DREXLER, JOSEPH

Street Address (Do NOT Use P.O. Box Number): 2760 N.E. 203RD ST.

City, State and Zip Code: MIAMI, FL. 33180

8. New Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on ....

SIGNATURE Joseph Drexler (Registered Agent Accepting Appointment) DATE 9-17-81

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under Instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation or the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature: G. E. Bartlett | Date: 9-17-81

Typed Name of Signing Officer: George Bartlett | Title: President | Telephone Number: 921-6766

DETACH STUB ONLY IF THERE ARE NO CHANGES TO THIS REPORT

NO CHANGE CERTIFICATE
1981 ANNUAL REPORT

BISCAYNE LAKE GARDENS BUILDING "J" INC.

A.

P67581

[illegible] 02/28/81 [illegible]

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT **1982**

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORRECTLY SPACE
APPROVED
AND
FILED
MAY 28 12 45 PM 1982
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office.

707581
BISCAYNE LAKE GARDENS BUILDING "J" INC
20200 N.W. 27TH CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business In Florida: 07/14/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 09/28/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
GORENBERG SYLVIA MRS	S/T	20200 N.E. 27TH CT.	MIAMI, FL. 0000
TRAHAN, CATHERINE	D	20200 NE 207 CT.	MIAMI, FL. 0000
[redacted], [redacted] PAUL, RUBY	D	20200 N.E. 27TH CT.	MIAMI, FL. 0000
GOLDEN, LOUIS	V/D	20200 N.E. 27TH CT.	MIAMI, FL. 0000
BARTLETT, GEORGE	P/D	20200 N.E. 27TH CT.	MIAMI, FL. 0000

Registered Agent Information

7. Name and Address of Current Registered Agent

DREXLER, JOSEPH
2760 N.E. 203RD ST.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature: G. E. Bartlett — Date: 4.26.82

Typed Name of Signing Officer: George Bartlett — Title: President — Telephone Number: 305-931-6766

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

1983

CORPORATION ANNUAL REPORT

1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED
Jun 15 [illegible] AM 1983

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

707581
BISCAYNE LAKE GARDENS BUILDING "J" INC
20200 N.W. 27TH CT.
MIAMI, Fl. 33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Florida Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address
P.O. Box No.
City
State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 05/28/1982

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~BARTLETT, GEORGE~~	~~P/D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
GORENBERG, SYLVIA MRS	S/T	20200 NE 27TH CT	MIAMI, FL 0000
~~FRAHAN, CATHERINE~~	~~D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
~~GOLDEN, LOUIS~~	~~V/D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
~~PAUL, RUBY~~	~~D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
DOMROE, EMANUEL	P/D	20200 NE 27th Ct.	Miami, Fl.
Roberts, Frances	V/D	20200 NE 27th Ct.	MIAMI, FLA.
LEVINE, FRANCES	D	20200 NE 27TH CT.	MIAMI, FLA.
PERRY, LORETTA	D	20200 NE 27TH CT.	MIAMI, FLA.

Registered Agent Information

7. Name and Address of Current Registered Agent

OREXLER, JOSEPH
2760 N.E. 203RD ST.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

Pursuant to the provisions of Section 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The above change was authorized by resolution duly adopted by its Board of Directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$5.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

Each Person Who Is An Officer of the Corporation and Required to Execute This Report as Required by Chapter 607, F.S. Must Clearly Print or Type Name and Title. Understand That Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath:

Sylvia Gorenberg — 6/10/83
Sylvia Gorenberg — Pres. Treas. — 981-1940

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
APPROVED
AND
FILED
JUL 9 9 45 AM 1984

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

707581
BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 N.W. 27TH CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No

City

State Zip Code

3. Date Incorporated or Qualified To Do Business In Florida: 07/14/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 06/15/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	LEVINE, FRANCES	D	20200 NE 27TH CT	MIAMI, FL 0000
2	~~ROBERTS, FRANCES~~	~~V/D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
3	~~GORENBERG, SYLVIA~~	~~S/T~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
4	~~DOMROE, EMANUEL~~	~~P/D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
5	~~PERRY, LORETTA~~	~~D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 0000~~
2	Domroe, Emanuel	V/D	20200 NE 27th Ct.	Miami, Fl
3	Lefcourt, Ann	S/T	20200 NE 27th Ct.	Miami, Fl.
4	Casella, Louis	P/D	20200 NE 27th Ct.	Miami, Fl.
5	Loewenton, Jean	D	20200 NE 27th Ct.	Miami, Fl.

Registered Agent Information

7. Name and Address of Current Registered Agent

DREXLER, JOSEPH
2760 N.E. 203RD ST.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Signature: Louis Casella

Date: 5/8/84

Typed Name of Signing Officer: President Louis Casella

Title: Pres.

Telephone Number: 932-2647

11. *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment*

CERTIFICATE OF STATUS DESIRED ☐
$5 Additional fee required for certificates

COR 620 (1-84)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1985

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
JUN 28 PM 12:44

◀ Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

707581 5
BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 N.W. 27TH CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4. Federal Employer Identification Number: 59-1235863

5. Date of Last Report: 07/09/1984

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
1	LEVINE, FRANCES	D	20200 NE 27TH CT	MIAMI, FL	0000
2	DOMROE, EMANUEL	V/D	20200 NE 27TH CT	MIAMI, FL	0000
3	LEFCOURT, ANN	S/T	20200 NE 27TH CT	MIAMI, FL	0000
4	CASELLA, LOUIS	P/D	20200 NE 27TH CT	MIAMI, FL	0000
5	LOEWENTON, JEAN	D	20200 NE 27TH CT	MIAMI, FL	0000
6					

Registered Agent Information

7. Name and Address of Current Registered Agent:

DREXLER, JOSEPH
2760 N.E. 203RD ST.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent:

Name: CASELLA, LOUIS

Street Address (Do NOT Use P.O. Box Number): 20200 N.E. 27th CT.

City, State and Zip Code: MIAMI, FL. 33180

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.
Such change was authorized by resolution duly adopted by its board of directors on: _____
I hereby accept the appointment of registered agent and am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE: Louis Casella (Registered Agent Accepting Appointment) DATE: 6/14/85

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer signing must be listed in Block 6)

Signature: Louis Casella Louis Casella

Date: 6/14/85

Typed Name of Signing Officer: LOUIS CASELLA

Title: PRESIDENT

Telephone Number: 932-2647

11. Would you like a Certificate of Status issued? CERTIFICATE OF STATUS DESIRED ☐

$5 additional fee required for a Certificate of Status

CR2EO34 (1/85)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

FOR DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required – Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

707581 5
BISCAYNE LAKE GARDENS BUILDING "J" INC.
~~20200 N.W. 27TH CT.~~
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21: 20200 N.E. 27th Ct.

P.O. Box No. 22:

City and State 23:

Zip Code 24:

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 05/28/1985

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1985

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
LEVINE, FRANCES	D	20200 NE 27TH CT	MIAMI, FL 00000
DOMROE, EMANUEL	V/D	20200 NE 27TH CT	MIAMI, FL 00000
Bartlett, Audrey J.	S/T	20200 N.E. 27th Ct.	Miami, Fl.
~~LEFCOURT, HAN~~	~~S/T~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 00000~~
CASELLA, LOUIS	P/D	20200 NE 27TH CT	MIAMI, FL 00000
Bartlett, George	D	20200 N.E. 27 Ct.	Miami, Fl.
LOEWENTON, JEAN	D	20200 NE 27TH CT	MIAMI, FL 00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

CASELLA, LOUIS
20200 N.E. 27TH CT.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name 31:

Street Address (Do NOT Use P.O. Box Number) 32:

City and State 33: FL.

Zip Code 34:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6)

Signature: X _____ Date: 6/2/86

Typed Name of Signing Officer: Louis Casella

Title: President

Telephone Number: 305- 932- 2647

11. Should you desire a certificate of status check the box:

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a

CR2E054 (1-86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987. NCED MGV

CORPORATION

ANNUAL REPORT
1987

B-23792

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE.
FILED
1987 JUN 17 AM 10: 15
FLORIDA DEPT OF STATE
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $25 Required -- Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

707561 5
BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 NE 27 CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 06/11/1986

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1986

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
~~LEVINE, FRANCES~~	~~D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 00000~~
Levine, Frances	V	20200 N.E. 27 Ct.	Miami, Fl. 33180
~~DOMROE, EMANUEL~~	~~V/D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 00000~~
Domroe, Emanuel	P/D	20200 N.E. 27 Ct.	Miami, Fl. 33180
BARTLETT, AUDREY J.	S/T	20200 NE 27 CT.	MIAMI, FL 00000
~~CASELLA, LOUIS~~	~~P/D~~	~~20200 NE 27TH CT~~	~~MIAMI, FL 00000~~
Reich, Sue	D	20200 N.E. 27 Ct.	Miami, Fl. 33180
~~BARTLETT, GEORGE~~	~~D~~	~~20200 NE 27 CT.~~	~~MIAMI, FL 00000~~
Wain, Harry	D	20200 N.E. 27 Ct.	Miami, Fl. 33180
Tavormina, Ben	D	20200 N.E. 27 Ct.	Miami, Fl. 33180

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

CASELLA, LOUIS
20200 N.E. 27TH CT.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name 81: Domroe, Emanuel

Street Address 1 (Do NOT Use P.O. Box Number) 82: 20200 N.E. 27 Ct.

Street Address 2 (Do NOT Use P.O. Box Number) 83:

City and State 84: Miami FL.

Zip Code 85: 33180

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on 12-12-86

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE Emanuel Domroe DATE 6/3/87
(Registered Agent Accepting Appointment)

$7.50 additional fee required for Registered Agent changes

CR2E004 (1/86)

10. See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6)

Signature: Emanuel Domroe Date: 6/3/87

Typed Name of Signing Officer: Domroe, Emanuel Title: President Telephone Number: (305) 931-2834

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

707581

BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 NE 27 CT.
MIAMI, FL. 33180

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 06/17/1987

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
LEVINE, FRANCES	V	20200 NE 27TH CT	MIAMI, FL	00000
DOMROE, EMANUEL	P/D	20200 NE 27TH CT	MIAMI, FL	00000
BARTLETT, AUDREY J.	S/T	20200 NE 27 CT.	MIAMI, FL	00000
REICH, SUE	D	20200 NE 27TH CT	MIAMI, FL	00000
~~WAINY, HARRY~~	~~D~~	~~20200 NE 27 CT.~~	~~MIAMI, FL~~	~~00000~~
TAVORMINA, BEN	D	20200 N.E. 27TH COURT	MIAMI, FL.	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

DOMROE, EMANUEL
20200 N.E. 27TH CT.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 617.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
Officer or Director signing must be listed in Block 6.)

Signature: Emanuel Domroe

Date: 6-20-88

Typed Name of Signing Officer or Director: Domroe, Emanuel

Title: President

Telephone Number: 931-2834

12. Should you desire a certificate of status, check the box.

CR2E024 (1/88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

APPROVED AND FILED
1989 JUN 16 AM 9:34
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

CORPORATION

ANNUAL REPORT
1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

ZIP + 4

707581 5
BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 NE 27 CT.
MIAMI, FL. 33180-2009

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4. Federal Employer Identification Number (FEIN): 59-1235863

5. Date of Last Report: 06/30/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State	5
1	~~V~~	~~LEVINE, FRANCES~~	~~20200 NE 27TH CT~~	~~MIAMI, FL~~	~~00000~~
1a	~~V/D~~	~~Perry, Clifford~~	~~20200 NE 27 Ct~~	~~MIAMI, FL~~	~~33180~~
2	P/D	DOMROE, EMANUEL	20200 NE 27TH CT	MIAMI, FL	00000
2a	D	Simpson, Isabel	20200 NE 27Ct.	MIAMI, FL	33180
3	S/T	BARTLETT, AUDREY J.	20200 NE 27 CT.	MIAMI, FL	00000
3a	D	Monahan, Irene	20200 NE 27 Ct.	MIAMI, FL	33180
4	D	RBICH, SUE	20200 NE 27TH CT	MIAMI, FL	00000
4a					
5	~~D~~	~~TAVORMINA, DEN~~	~~20200 NE 27 CT.~~	~~MIAMI, FL~~	~~00000~~
5a					
6	~~D~~	~~TAVORMINA, DEN~~	~~20200 N.E. 27TH COURT~~	~~MIAMI, FL.~~	
6a					

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

DOMROE, EMANUEL
20200 N.E. 27TH CT.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, state first transacted business in Florida _____

11. State signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer or Director signing must be listed in Block 6.)

Signature: x Audrey J Bartlett
Date: 5-26-89

Typed Name of Signing Officer or Director: Audrey J. Bartlett
Title: Secretary/Treasurer
Telephone Number: (305) 931-0442

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

CR2E004 (1-88)

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST - P50000911

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

AMD
FILED
1990 MAY 15 PM 1:51

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office. **707581 5**

ZIP + 4 PRESORT
BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 NE 27 CT.
MIAMI, FL. 33180-2009

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida **07/14/1964**

4. FEI Number **59-1235863**

☐ FEI Number Applied For
☐ FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
D	SIMPSON, ISABEL	20200 NE 27TH CT	MIAMI, FL	00000
P/D	DOMROE, EMANUEL	20200 NE 27TH CT	MIAMI, FL	00000
S/T	BARTLETT, AUDREY J.	20200 NE 27 CT.	MIAMI, FL	00000
D	MONAHAN, IRENE	20200 NE 27TH CT	MIAMI, FL	00000
~~D~~	~~TAVORMINA, BEN~~	~~20200 NE 27 CT.~~	~~MIAMI, FL~~	~~00000~~

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

DOMROE, EMANUEL
20200 N.E. 27TH CT.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effects as if made under oath; I further certify 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, F.S.

Signature X Emanuel Domroe Date 4-26-90

Typed Name of Signing Officer or Director: EMANUEL DOMROE

Title: PRESIDENT

Telephone Number: 305-931-0642

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee
Secretary of State

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

AH2691

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

Read instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1 Name and Mailing Address of Corporation DOCUMENT #707581 (5)

ZIP + 4 PRESORT

P91080571

BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 NE 27 CT.
MIAMI, FL. 33180-2009

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No

23 City and State

24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

4 FEI Number: 59-1235863

FEI Number Applied For

FEI Number Not Applicable

5 $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	
1	D	SIMPSON, ISABEL	20200 NE 27TH CT	MIAMI, FL	00000
1a					
2	~~P/D~~	~~DOMROE, EMANUEL~~	~~20200 NE 27TH CT~~	~~MIAMI, FL~~	~~00000~~
2a					
3	~~S/T~~	~~BARTLETT, AUDREY J.~~	~~20200 NE 27 CT.~~	~~MIAMI, FL~~	~~00000~~
3a					
4	D/T	MONAHAN, IRENE	20200 NE 27TH CT	MIAMI, FL	00000
4a					
5	S/D	REICH, SUE	20200 NE 27 CT	MIAMI, FL	
5a	D	ARABIA, DEBORAH	20200 NE 27 CT	MIAMI, FL	
6	D	DURAN, LEYDA	20200 NE 27 CT	MIAMI, FL	
6a	D	STOTE, Albert	20200 NE 27 CT	MIAMI, FL	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

DOMROE, EMANUEL
20200 N.E. 27TH CT.
MIAMI, FL. 33180

8. Name and Address of New Registered Agent

81 Name: MONAHAN, IRENE

82 Street Address 1 (Do NOT Use PO Box Number): 20200 NE 27 CT

83 Street Address 2 (Do NOT Use PO Box Number):

84 City: MIAMI FL. 85 Zip Code: 33180

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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 X Irene Monahan (Registered Agent Accepting Appointment) DATE 6/17/91

10. I hereby certify that the information indicated on this annual report or supplemental annual 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 6 or on an attachment with an address.

SIGNATURE X Irene Monahan DATE 6/17/91

Typed Name of Person Signing: MONAHAN, IRENE

Title: Treasurer / Director

Telephone Number Daytime: (305) 931-0642

FILING FEE OF $61.25 REQUIRED - Make Checks Payable To: Secretary of State $8.75 Additional Fee required

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

MAY-1 '92

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

DO NOT WRITE IN THIS SPACE

FILING FEE $61.25 Make Payable To: Secretary of State

1. Name and Mailing Address of Corporation DOCUMENT # 707581 (5)

BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 NE 27 CT.
MIAMI FL 33180-2009

If [redacted] rect in any way, line through the incorrect information and enter correct address in Block 2.

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/14/1964

3a. Date of Last Report: 06/26/1991

4. FEI Number: 59-1235863

FEI Number Applied For.

FEI Number Not Applicable

5. $8.75 ... CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	
1 / 1x	D /P	~~SIMPSON, ISABEL~~ SIMPSON, JOHN	20200 NE 27TH CT	MIAMI, FL	00000
2 / 2x	~~S/D~~	~~REICH, SUE~~	~~20200 NE 27TH CT~~	~~MIAMI, FL~~	~~00000~~
3 / 3x	D /S	ARABIA, DEBORAH	20200 NE 27 CT.	MIAMI, FL	00000
4 / 4x	D/T	MONAHAN, IRENE	20200 NE 27TH CT	MIAMI, FL	00000
5 / 5x	D	DURAN, LEYDA	20220 NE 27 COURT	MIAMI, FL	
6	D	~~STOTE, ALBERT~~	~~20200 NE 27 COURT~~	~~MIAMI, FL~~	

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MONAHAN, IRENE
20200 N.E. 27TH CT.
MIAMI, FL. 33180

John Simpson

8. Name and Address of New Registered Agent

81 Name: JOHN SIMPSON

82 Street Address 1 (Do NOT Use P.O. Box Number): 20200 NE 27TH CT

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City: MIAMI FL. 85 Zip Code: 33180

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this 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 John Simpson DATE ______
(Registered Agent Accepting Appointment)

10. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. Yes ☐ No ☑ (See other side for information on intangible tax)

11. I certify that the information indicated on this annual report or supplemental annual 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 or Chapter 617, Florida Statutes; and that my name appears in Block 6 or an attachment with an address.

SIGNATURE John Simpson

JOHN SIMPSON | DIRECTOR/PRESIDENT | DATE | 305 932-9146

12. [illegible]

File Now. Filing Fee after May 1 is $225.00

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
TALLAHASSEE, FLA.
FILED

1. Name and Mailing Address of Corporation: DOCUMENT # 707581 (5)

BISCAYNE LAKE GARDENS BUILDING "J" INC.
20200 NE 27TH CT
MIAMI FL 33180-2009

DO NOT WRITE IN THIS SPACE

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

3. Date Incorporated or Qualified: 07/14/1964
3a. Date of Last Report: 05/01/1992

4. FEI Number: 591235863 (Applied For / Not Applicable)

FILING FEE $200.00	ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(C)(3) Tax Exempt Status ☐ — $138.75 Supplemental Fee Not Required

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Mailing Address	2a. Principle Place of Business
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SIMPSON, JOHN
20200 NE 27TH CT
MIAMI FL 33180

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 Zip Code 36 Country

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this 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 _____ DATE _____
(Registered Agent Accepting Appointment)

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS CHANGES	
1.1 TITLE	O/P	1.1 TITLE	
1.2 NAME	SIMPSON, JOHN	1.2 NAME	
1.3 ADDRESS	20200 NE 27TH CT	1.3 ADDRESS	
1.4 CITY ST ZIP	MIAMI, FL 00000	1.4 CITY ST ZIP	
2.1 TITLE	D	2.1 TITLE	
2.2 NAME	ARABIA, DEBORAH	2.2 NAME	
2.3 ADDRESS	20200 NE 27 CT.	2.3 ADDRESS	
2.4 CITY ST ZIP	MIAMI, FL 00000	2.4 CITY ST ZIP	
3.1 TITLE	~~D/P~~	3.1 TITLE	
3.2 NAME	~~BENAHAR, INGRI~~	3.2 NAME	
3.3 ADDRESS	~~20200 NE 27TH CT~~	3.3 ADDRESS	
3.4 CITY ST ZIP	~~MIAMI, FL 00000~~	3.4 CITY ST ZIP	
4.1 TITLE	D	4.1 TITLE	
4.2 NAME	DURAN, LEYDA	4.2 NAME	
4.3 ADDRESS	20220 NE 27 COURT	4.3 ADDRESS	
4.4 CITY ST ZIP	MIAMI FL	4.4 CITY ST ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 ADDRESS		5.3 ADDRESS	
5.4 CITY ST ZIP		5.4 CITY ST ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 ADDRESS		6.3 ADDRESS	
6.4 CITY ST ZIP		6.4 CITY ST ZIP	

14. I hereby certify that the information indicated on this annual report, including supplemental sums, all report is true and accurate and that my signature shall serve the same legal effect as if made under oath; I further certify 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 above with an indication of any change or on an attachment with an address.

SIGNATURE X John T. Simpson DATE 4-16-93

John Simpson — President/Director — (305) 931-0642

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
94 APR 27 PM 3:42

1. Corporation Name
BISCAYNE LAKE GARDENS BUILDING "J" INC.

DOCUMENT #
707581 (5)

Mailing Address
20200 NE 27 CT.
MIAMI FL 33180

Principal Place of Business
20200 NE 27 CT.
MIAMI FL 33180

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/14/1964
3a. Date of Last Report: 04/19/1993

2. Mailing Address (21)
2a. Principal Place of Business (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (24) Country (25)

4. FEI Number: 59-1235883 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired $8.75 ☐
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit Exempt from $138.75 Supplemental Fee ☐
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
SIMPSON, JOHN
20200 NE 27TH CT
MIAMI FL 33180

10. Name and Address of New Registered Agent
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 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this 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 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Registered Agent (Including Appointment) (NOTE: Registered Agent signature required when reinstating).

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	D/P	11 TITLE	
12 NAME	SIMPSON, JOHN	12 NAME	
13 STREET ADDRESS	20200 NE 27TH CT	13 STREET ADDRESS	
14 CITY-ST-ZIP	MIAMI, FL 00000	14 CITY-ST-ZIP	
21 TITLE	D	21 TITLE	
22 NAME	ARABIA, DEBORAH	22 NAME	
23 STREET ADDRESS	20200 NE 27 CT.	23 STREET ADDRESS	
24 CITY-ST-ZIP	MIAMI, FL 00000	24 CITY-ST-ZIP	
31 TITLE	D	31 TITLE	
32 NAME	DURAN, LEYDA	32 NAME	
33 STREET ADDRESS	20220 NE 27 COURT	33 STREET ADDRESS	
34 CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP	
41 TITLE		41 TITLE	
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY-ST-ZIP		44 CITY-ST-ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY-ST-ZIP		54 CITY-ST-ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Secretary of State from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report or supplemental annual report is true and complete and that my signature shall have the same legal effect as if made under oath; that I am a director or officer of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Leyda Duran Leyda Duran 4-19-94 931-0642
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL WHO SIGNED Date Daytime Phone #

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAY -1 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 707581 (5)

1. Corporation Name
BISCAYNE LAKE GARDENS BUILDING "J" INC.

Principal Place of Business	Mailing Address
20200 NE 27 CT. MIAMI FL 33180	20200 NE 27 CT. MIAMI FL 33180

DO NOT WRITE IN THIS SPACE

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3a. Date of Last Report: 04/27/1994
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6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
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23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

SIMPSON, JOHN
20200 NE 27TH CT
MIAMI FL 33180

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82 Street Address (P.O. Box Number is Not Acceptable)
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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 this 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	SIMPSON, JOHN	1.2 NAME	
STREET ADDRESS	20200 NE 27TH CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	ARABIA, DEBORAH	2.2 NAME	
STREET ADDRESS	20200 NE 27 CT.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	DURAN, LEYDA	3.2 NAME	
STREET ADDRESS	20220 NE 27 COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

$8.75/18

14. I am hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John E. Simpson John E. Simpson 4-24-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

(305)931-042
Telephone number