

corp-32

NP # 739698

COSTA BELLA ASSOCIATION, INC.

New Corporation     Reincorporation     Amendment (\$817.02)

Filed: 7/20/77

By: \_\_\_\_\_

700307188227

*[Handwritten signature]*

*739698*

101-4



# Secretary of State

STATE OF FLORIDA  
THE CAPITOL  
TALLAHASSEE 32304

July 20, 1977

F. R. RITTER, Director  
Division of Corporations  
904/488-3140

DAVID C. MACNAMARA  
ASSISTANT SECRETARY OF STATE

BRUCE A. SMATHERS  
SECRETARY OF STATE

John L. Gornall, Jr., Esq.  
Suite 200, Peachtree & Broad Bldg.  
Atlanta, Georgia 30303

SUBJECT: COSTA BELLA ASSOCIATION, INC.

DOCUMENT NUMBER: 739698

This will acknowledge receipt of the following:

1.  Check(s) totalling \$ 38.00
2.  Articles of Incorporation filed July 20, 1977
3.  Amendments to Articles of Incorporation filed
4.  Articles of Merger or Consolidation filed
5.  Certificate of Withdrawal filed
6.  Limited Partnership filed
7.  Limited Partnership Annual Report filed
8.  Trademark Application filed
9.  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.
10.  Reinstatement filed
11.  Articles of Dissolution filed
12.  OTHER:

### ENCLOSED:

1.  Certified Copy(ies)
2.  Certificate(s) Under Seal
3.  Photocopy(ies)
4.  OTHER:

Copy 100  
7/1/77

186-7

ADMITTED  
LAW OFFICES

**COFER, BEAUCHAMP & HAWES**

SUITE 200, PEACHTREE & BROAD BUILDING

ATLANTA, GEORGIA 30303

FLORIDA DEPT. OF STATE  
CORPORATIONS DIVISION  
TALLAHASSEE, FLORIDA  
June 16, 1977

TELEPHONE  
104/577-0200  
TELEX:  
54 257C  
CABLE:  
COLBAR-ATL

CARL H. COFER  
ROBERT S. BEAUCHAMP  
PEYTON S. HAWES, JR.  
HARR J. LEVICK  
RANDALL B. SCOGGINS  
ROBERT F. GOODMAN, JR.  
JAMES M. ROLLINS  
JOHN L. GORNALL, JR.  
LUTHER C. CURTIS  
ROBERT S. JONES  
KENNETH H. WEISS  
J. BOYO PAGE  
WILLIAM L. BOST, JR.  
J. LINDSAY STRADLEY, JR.  
DONALD A. BAKER  
CHARLES H. IVY  
TIMOTHY J. SWEENEY  
P. MICHAEL IYICH III  
THOMAS H. RIES  
HARRIS R. ANTHONY

739698

739698-77-2 97200\*\*\*\*3.00  
739698-77-2 97100\*\*\*\*5.00  
739698-77-2 97000\*\*\*\*27.00

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

Re: Articles of Incorporation of Costa Bella Association, Inc.

Dear Sir:

*AM*

Please find enclosed herewith two executed copies of the Articles of Incorporation of Costa Bella Association, Inc., intended to be a not for profit corporation. Also enclosed is a check payable to you in the amount of \$35.00. Please file one of the enclosed executed copies so that the corporate existence of Costa Bella Association, Inc. may begin. Also, please use the other executed copy to furnish the undersigned a certified copy of these Articles of Incorporation.

Thank you for your assistance.

Sincerely,

*John L. Gornall, Jr.*  
John L. Gornall, Jr. *per*

JLG:jm  
cc: Mr. Eduardo R. De Arellano  
Mr. Dalbert W. Jones

598057

PRIVILEGE TAX	
C. TAX	
FILING	27
C. COPY	3
R. A. FEE	3
P. COPY	
SEARCH	
TOTAL	33
BALANCE DUE	3

RECEIVED  
JUN 25 10 51 AM 1977  
DEPARTMENT OF STATE  
TALLAHASSEE, FLA.

FF 30

A-987

LAW OFFICES  
**COFER, BEAUCHAMP & HAWES**  
 SUITE 200, PEACHTREE & BROAD BUILDING  
 ATLANTA, GEORGIA 30303

CARL H. COFER  
 ROBERT S. BEAUCHAMP  
 PEYTON S. HAWES, JR.  
 MARK J. LEWICK  
 RANDALL B. SCOGGINS  
 ROBERT F. GOODMAN, JR.  
 JAMES H. POLLINS  
 JOHN L. BRNALL, JR.  
 LUTHER C. CURTIS  
 ROBERT S. JONES  
 KENNETH M. WEISS  
 J. BOYD PAGE  
 WILLIAM L. BOST, JR.  
 J. LINDSAY STRADLEY, JR.  
 DONALD A. BACER  
 CHARLES M. IVY  
 TIMOTHY J. SWEENEY  
 P. MICHAEL LYNCH III  
 THOMAS H. RIES  
 HARRIS R. ANTHONY

TELEPHONE:  
 404/577-8200  
 TELEX:  
 54 3328  
 CABLE:  
 COBEAW-ATL

JUL 18 1977  
 FLORIDA STATE  
 CORPORATIONS DIVISION  
 TALLHASSEE, FLORIDA  
 June 28, 1977

Office of the Secretary of State  
 State of Florida  
 Division of Corporations  
 Charter Section  
 The Capitol  
 Tallahassee, Florida 32304

RM 18-77-2 13000 \*\*\*\*3.00

Re: Costa Bella Association, Inc. and your letter of  
 June 23, 1977 to John L. Gornall, Jr.

Dear Sir or Madam:

Enclosed is a check payable to the Secretary of State in the amount of \$3.00 to cover the balance due in connection with the above-referenced matter. Please note that the enclosed Articles of Incorporation of Costa Bella Association, Inc. have been drafted in accordance with the letter referenced above.

Upon your filing of the Articles of Incorporation, please return a certified copy of one of the two enclosed executed originals to the undersigned.

Thank you for your assistance.

Sincerely,

*J. Lindsay Stradley, Jr.*  
 J. Lindsay Stradley, Jr.

JLS:jm  
 Enclosures

PRIVILEGE TAX	
C. TAX	
FILING	3
C. COPY	
R. A. FEE	
P. COPY	
SEARCH	
TOTAL	3
BALANCE DUE	

RECEIVED  
 JUL 18 9 20 AM 1977  
 CORPORATION OF STATE  
 MAIL ROOM  
 TALLHASSEE, FLA.

A-987



Brace A. Smithers  
SECRETARY OF STATE

# Secretary of State

STATE OF FLORIDA  
THE CAPITOL  
TALLAHASSEE 32304

June 23, 1977

APPROVED  
AND  
FILED  
JUN 20 1977

FLORIDA  
CORPORATION  
TALLAHASSEE

Mr. John L. Gornal Jr.  
Cofor, Beauchamp & Hawes  
Suite 200 Peachtree & Broad Building  
Atlanta, Georgia 30303

Division of Corporations  
Charter Section  
204/483-2675

SUBJECT: COSTA BELLA ASSOCIATION, INC.

Returned ; Pending \_\_\_\_\_; Check acknowledged \$35.00

1. \_\_\_\_\_ NAME IS NOT AVAILABLE.
2. \_\_\_\_\_ Name must include a corporate suffix, INC. or INCORPORATED.
3.  BALANCE DUE. \$3.00
4. \_\_\_\_\_ The number of directors the corporation shall have (no less than three) must be shown with a statement designating the total number.
5. \_\_\_\_\_ The articles state that there will be \_\_\_\_\_ directors (initially) However, \_\_\_\_\_ are listed.
6. \_\_\_\_\_ The qualifications for membership must be shown in the articles of incorporation.
7. \_\_\_\_\_ The articles of incorporation must state who will manage the affairs of the corporation.
8. \_\_\_\_\_ Please list the officers and the office(s) held by each.
9.  A designation of registered office and registered agent at the same address must be contained within the articles of incorporation, and the registered agent must sign accepting that designation.
10. \_\_\_\_\_ All incorporators must sign and their signatures must be acknowledged.
11. \_\_\_\_\_ All incorporators signing must be listed in Article \_\_\_\_\_.
12. \_\_\_\_\_ Notary public's acknowledgment is incomplete.
13. \_\_\_\_\_ Incorporators cannot notarize their own signatures.
14. \_\_\_\_\_ The document(s) must be legible for microfilm.
15. \_\_\_\_\_ You must list at least three (3) directors and three (3) incorporators.
16.  The articles must state by whom the by-laws may be made, altered, or rescinded. Please be more specific.
17. \_\_\_\_\_ The articles must state by whom and in what manner amendments to the articles of incorporation may be made.
18. \_\_\_\_\_

A-987

FILED  
JUN 20 8 21 AM 1977  
FLORIDA DEPT. OF STATE  
CORPORATIONS DIVISION  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
COSTA BELLA ASSOCIATION, INC.

By these Articles, the undersigned hereby associate themselves for the purpose of forming a corporation not for profit under Chapter 617, Florida Statutes, and certify as follows:

ARTICLE I.

Name and Definitions

The name of the corporation shall be COSTA BELLA ASSOCIATION, INC. For convenience, the corporation shall be referred to in this instrument as the "Association", and the terms used herein shall have the meaning for each stated in the Condominium Act and the Declaration of Condominium of Costa Bella Condominium (herein referred to as the "Declaration of Condominium"), as said condominium is described below, unless the context otherwise requires.

ARTICLE II.

Purpose

A. The purpose for which the Association is organized is to provide an entity pursuant to Section 718.111 of the Condominium Act, Chapter 718, Florida Statutes, for the operation of Costa Bella Condominium, to be located on the following property in Dade County, Florida:

All those pieces, parcels or tracts of land, situate in the County of Dade and State of Florida, described as follows:

All of Lots 36, 37, 38, 39, 40, 41 and the East 16 feet of Lot 42, all of Lots 50, 51, 52, 53, 54, 55, 56, 57, and Out-Lots 55, 56 and 57, Block 2, and Alleyways, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida.

LESS

All that portion of Out-Lot 55, Block 2, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, as recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida, which lies northwesterly of a line which is concentric with and 60 feet southeasterly (as measured along extended radial lines to the curve) of the southeasterly boundary line of Lots 55 and 56, Block 2, AMENDED PLAT OF POINT VIEW.

LESS

All that portion of Out-Lot 56, Block 2, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, as recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida, which lies northwesterly of a line which is concentric with and 60 feet southeasterly (as measured along extended radial lines to the curve) of the southeasterly boundary line of Lots 56 and 57, Block 2, AMENDED PLAT OF POINT VIEW.

LESS

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All that portion of Out-Lot 57, Block 2, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, as recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida, which lies northwesterly of a line which is concentric with and 60 feet southeasterly (as measured along extended radial lines to the curve) of the southeasterly boundary line of Lots 57 and 58, Block 2, AMENDED PLAT OF POINT VIEW.

B. The Association shall pay no dividend, and shall distribute no part of its income to its members, Directors or officers. Nevertheless, the Association may pay compensation in a reasonable amount to its members, Directors, and officers for services rendered, and it may confer benefits upon its members in conformity with the purposes of the Association. Upon termination of the Condominium, the Association may make distributions to its members as permitted by law, and no such payment, benefit or distribution shall be deemed to be a dividend or distribution of income.

#### ARTICLE III.

##### Powers

The powers of the Association shall include and be governed by the following provisions:

A. The Association shall have all of the common law and statutory powers of a corporation not for profit which are not in conflict with the purposes of the Association, as set forth in Section B of this Article III, and terms of these Articles, the Declaration of Condominium, and the Condominium Act.

B. The purposes of the Association are to manage, operate, maintain, replace and care for the Condominium Property, items of property on the Land which are owned by members, and property owned by a governmental unit and used for the benefit of Unit Owners.

C. In furtherance of the purposes of the Association, as set forth in Section B of this Article III, the Association shall have all of the powers and duties set forth in the Condominium Act, and all of the powers and duties reasonably necessary to operate the Condominium pursuant to the Declaration as presently drafted and as it may be amended from time to time, including but not limited to the following:

1. The irrevocable right to make and collect Assessments against members as Unit Owners to defray the costs, expenses and losses of the Condominium.

2. To use the proceeds of Assessments in the exercise of its powers and duties.

3. To maintain, repair, replace and operate the Condominium Property, which shall include the irrevocable right to access to each Unit from time to time during reasonable hours as may be necessary for such maintenance, repair or replacement of any Common Elements therein or accessible therefrom, or for the making of emergency repairs therein to prevent damage to the Common Elements or to another Unit or Units.

4. To purchase insurance upon the Condominium Property and insurance for the protection of the Association and its members as Unit Owners.

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5. To reconstruct improvements after casualty and to construct further improvements of the Condominium Property.

6. To make and amend reasonable regulations respecting the use of the Condominium Property.

7. To enforce by legal means the provisions of the Condominium Act, the Declaration of Condominium, these Articles, the By-Laws of the Association and the regulations for the use of the property in the Condominium.

8. To contract for the maintenance, management or operation of the Condominium Property and to delegate to such manager all powers and duties of the Association not specifically required by the Declaration of Condominium to have approval of the Board of Directors or the membership of the Association.

9. To employ personnel for reasonable compensation to perform the services required for proper administration and operation of the Association.

10. To pay taxes and assessments which are liens against any part of the Condominium other than individual Units (unless the individual Unit or Units are owned by the Association) and the appurtenances thereto, and to assess the same against the Units subject to liens for such purposes.

11. To pay the cost of all power, water, sewer, trash, garbage and other utility services rendered to the Condominium and not billed to owners of individual Units.

12. To adopt and establish By-Laws for the operation of the Condominium Property.

The powers of the Association shall be subject to and shall be exercised in accordance with the provisions of the Declaration of Condominium.

D. Subject to the restrictions set forth in Section 16 of the Declaration of Condominium, the Association shall have the power to purchase a Unit or Units and to hold, lease, mortgage and convey the same.

#### ARTICLE IV.

##### Members

A. The members of the Association shall consist of all of the Unit Owners of record in the Condominium, and after termination of the Condominium shall consist of those who are members at the time of such termination and their successors and assigns.

B. Change of membership in the Association shall be established by recording in the Public Records of Dade County, Florida, a deed or other instrument establishing a record title to a Condominium Parcel and the delivery to the Association of a true copy of such instrument. The new Unit Owner designated by such instrument shall thereupon become a member of the Association and the membership of the prior Unit Owner shall thereby be terminated.

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C. The share of a member in the funds and assets of the Association cannot be assigned, hypothecated or transferred in any manner, except as an appurtenance of his Unit.

D. In connection with membership in the Association, the owner(s) of each Condominium Parcel shall be entitled to one vote per Condominium Parcel owned, except that the Association shall not be entitled to a vote for any Condominium Parcel owned by the Association. The manner of exercising voting rights shall be determined by the By-Laws of the Association.

#### ARTICLE V.

##### Directors

A. The affairs of the Association shall be managed by a Board of Directors. The initial Board of Directors designated by the Sponsor shall consist of three Directors. After Unit Owners other than the Sponsor are entitled to elect at least one-third of the Directors, the Board of Directors shall consist of six (6) Directors. After Unit Owners other than the Sponsor are entitled to elect a majority of the Board of Directors, the Board shall consist of nine (9) Directors, of whom five (5) Directors shall be elected by the Unit Owners and four (4) Directors shall be designated by the Sponsor. Upon the resignation of the four (4) Directors designated by the Sponsor, the Board of Directors shall then consist of five (5) Directors. Except as otherwise provided herein or in the By-Laws, each Director shall be either a person designated by the Sponsor or a person entitled to cast a vote in the Association.

B. Directors may be designated or elected and removed and vacancies on the Board of Directors shall be filled as provided in the By-Laws.

C. The names and addresses of the three members of the first Board of Directors, who shall hold office until the election or appointment of their successors, are as follows:

Eduardo R. De Arellano	378 Gulf Road Key Biscayne, Florida 33149
Jorge Echarte, Jr.	2621 N.E. 46th Street Fort Lauderdale, Florida 33313
Juan Valdes-Pages	5950 S.W. 74th Street Miami, Florida 33143

#### ARTICLE VI.

##### Officers

The affairs of the Association shall be administered by the officers designated in accordance with the By-Laws. The names and addresses of the officers who shall serve until the election or appointment of their successors are as follows:

Eduardo R. De Arellano, President	378 Gulf Road Key Biscayne, Florida 33149
Jorge Echarte, Jr., Vice President	2621 N.E. 46th Street Fort Lauderdale, Florida 33313
Juan Valdes-Pages, Secretary and Treasurer	5950 S.W. 74th Street Miami, Florida 33143

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ARTICLE VII.

Indemnification and Insurance

Every Director and every officer of the Association shall be indemnified by the Association against all expenses and liabilities, including counsel fees, reasonably incurred by or imposed upon him in connection with any proceeding or any settlement of any proceeding to which he may be a party or in which he may become involved by reason of his being or having been a Director or officer of the Association, whether or not he is a Director or officer at the time such expenses are incurred, except when the Director or officer is adjudged guilty of wilful misfeasance or malfeasance in the performance of his duties; provided, that in the event of settlement, the indemnification shall apply only when the Board of Directors approves such settlement and reimbursement as being in the best interests of the Association. The foregoing right of indemnification shall be in addition to and not exclusive of all other rights to which such Directors or officers may be entitled.

The Board of Directors may, and shall if reasonably available, purchase liability insurance to insure all Directors, officers or agents, past and present against all expenses and liabilities as set forth above. The premiums for such insurance shall be paid by the Association as a part of the Common Expense.

ARTICLE VIII.

By-Laws

The first By-Laws of the Association shall be adopted by the Board of Directors and may be altered, amended or rescinded by the Board of Directors or the members of the Association as provided in the By-Laws.

ARTICLE IX.

Amendments

Amendments to these Articles of Incorporation shall be proposed and adopted in the following manner:

A. Notice of the subject matter of a proposed amendment shall be included in the notice of any meeting at which a proposed amendment is considered.

B. A resolution for the adoption of a proposed amendment may be proposed either by the Board of Directors or by members owning seventy-five (75%) percent or more of the Condominium Parcels. Directors and members not present in person or by proxy at the meeting to consider the amendment may express their approval in writing, provided such approval is delivered to the Secretary prior to such meeting. A resolution adopting a proposed amendment must bear the approval of not less than a majority of the Board of Directors and of members owning not less than seventy-five (75%) percent of the Condominium Parcels.

C. In the alternative, an amendment may be made by an agreement signed and acknowledged by all the record owners of Condominium Parcels in the manner required for the execution of a deed.

D. No amendment shall make any changes in the qualifications for membership nor the voting rights of members, nor any change in

A-987

Section C of Article III, above, without approval in writing by all members and the written consent of all record owners of mortgages upon Units within the Condominium. No amendment that is in conflict with the Condominium Act or the Declaration of Condominium shall be made, or, if made, shall be of any force or effect.

E. A copy of each amendment shall be certified by the Secretary of State, State of Florida, and be recorded in the Public Records of Dade County, Florida.

F. Sections A and B of this Article IX notwithstanding, until such time as Unit Owners other than the Sponsor lawfully elect a majority of the Directors, amendments to these Articles of Incorporation may be adopted at any meeting of the Board of Directors by a majority vote of the Board of Directors.

#### ARTICLE X.

##### Term

The term of the Association shall be perpetual.

#### ARTICLE XI.

##### Subscribers

The names and addresses of the three subscribers to these Articles of Incorporation are as follows:

Eduardo R. De Arellano	378 Gulf Road Key Biscayne, Florida 33149
Jorge Echarte, Jr.	2621 N.E. 46th Street Fort Lauderdale, Florida 33313
Juan Valdes-Pages	5950 S.W. 74th Street Miami, Florida 33144

#### ARTICLE XII.

##### Initial Registered Office and Agent

The street address of the Association and the initial registered office of it is 1450 South Bayshore Drive, Miami, Florida 33131, and the name of the initial registered agent of the Association at said address is Eduardo R. De Arellano.

IN WITNESS WHEREOF, the subscribers have hereunto affixed their signatures this 15<sup>th</sup> day of July, 1977.

Eduardo R. De Arellano  
Eduardo R. De Arellano  
Jorge Echarte, Jr.  
Jorge Echarte, Jr.  
Juan Valdes-Pages  
Juan Valdes-Pages

A-987

STATE OF FLORIDA }  
                          } SS  
COUNTY OF DADE    }

BEFORE ME, the undersigned authority on this day personally appeared EDUARDO R. DE ARELLANO, JORGE ECHEPTE, JR. and JUAN VALDES-PAGES, who, being duly sworn, severally acknowledged the execution of the foregoing Articles of Incorporation of Costa Bella Association, Inc. for the purposes expressed in such Articles.

WITNESS my signature and official seal at Miami, in the State and County last aforesaid, this 15 day of July, 1977.

*Marion M. O'Connell*  
Notary Public, State of Florida  
at Large

My Commission expires: \_\_\_\_\_

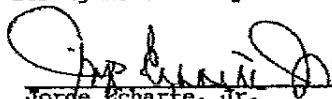
Notary Public, State of Florida at Large  
My Commission Expires May 1, 1979  
Bonded by American Fire & Casualty Co.

A-987

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING  
AGENT UPON WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 48.091, Florida Statutes, the following  
is submitted in compliance with said Act:

COSTA BELLA ASSOCIATION, INC., a corporation not for profit,  
desiring to organize under the laws of the State of Florida, with  
its principal place of business and registered office in the City  
of Miami, State of Florida, has named Eduardo R. De Arellano,  
located at 1450 South Bayshore Drive, City of Miami, County of  
Dade, State of Florida, 33131, as its agent to accept service of  
process within Florida.

  
\_\_\_\_\_  
Jorge Echarte, Jr.  
Vice President

Date: July 15 1977

ACKNOWLEDGMENT:

Having been named to accept service of process for the above-  
named corporation at the place designated in this Certificate,  
I hereby agree to act in this capacity, and I further agree to  
comply with the provisions of all statutes relative to the proper  
and complete performance of my duties and the keeping open of said  
office.

  
\_\_\_\_\_  
Eduardo De Arellano

Date: July 15, 1977

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THE FILING FEE FOR THE 1978 ANNUAL REPORT

STATE OF FLORIDA  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
**CORPORATION ANNUAL REPORT  
1978**



Bruce A. Smathers  
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE (Form COR 620) 12-1-77

AND  
FILED  
JUN 30 9 00 AM 1978  
FLORIDA DEPT. OF STATE  
CORPORATION'S DIVISION  
TALLAHASSEE, FLORIDA

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

1. Name and Address of Corporation Principal Office:  739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		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	07/20/1977	4. Federal Employer Identification Number (FEIN)	59-1754406	5. Date of Last Report
--	------------	--	------------	---------------------------

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
DE ARELLANO, EDUARDO	PRES. DIR	✓	378 GULF ROAD	KEY BISCAYNE FL
ECHARTE, JORGE JR.	V. PRES. DIR	✓	2621 N.E. 46TH ST.	FT. LAUDERDALE FL
VALDES-PAGES, JUAN	TREAS. SEC.	✓	5950 S.W. 74TH ST.	MIAMI FL
VALDES-PAGES, JUAN	SEC. DIR	✓	5950 S.W. 74TH ST.	MIAMI FL

7. Registered Agent Information	Name DE ARELLANO, EDUARDO R.	Street Address (Do NOT Use P.O. Box Number) 1450 S. BAYSHORE DRIVE
	City, State and Zip Code MIAMI, FLORIDA 33131	
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 JUAN VALDES-PAGES	Title TREASURER / SECRETARY	Telephone Number 305-373-3131
Signature <i>J. Valdes-Pages</i>	Date FEB 20, 1978	

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

DO NOT WRITE IN THIS SPACE

1979

APR 16 11 12 AM '79

FLORIDA DEPT. OF STATE  
CORPORATIONS DIVISION  
TALLAHASSEE, FLORIDA

MC 17 70 2 396\*\*\*\*\*10.00

THIS REPORT MUST BE ACCOMPANIED BY A \$10

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:  
 739698  
 COSTA BELLA ASSOCIATION, INC.  
 1450 S. BAYSHORE DRIVE  
 MIAMI, FLORIDA 33131

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 \_\_\_\_\_

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

3. Date Incorporated or Qualified To Do Business in Florida: 7/20/1977  
 4. Federal Employer Identification Number (FEIN): 59-1754406  
 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
<del>DE ARELLANO, EDUARDO</del>	P/D	<del>378 GULF ROAD</del>	<del>KEY BISCAYNE FL</del>
<del>ECHARTE, JORGE JR.</del>	V/D	<del>2623 N.E. 46TH ST.</del>	<del>FT. LAUDERDALE FL</del>
<del>VALDES PAGES, JUAN</del>	T/D	<del>5950 S.W. 74TH ST.</del>	<del>MIAMI FL</del>
<del>VALDES PAGES, JUAN</del>	S/D	<del>5950 S.W. 74TH ST.</del>	<del>MIAMI FL</del>
Berman, Neil	P/D	1450 S. Bayshore Drive Apt. #514	Miami, Fla.
Kasner, Norman	V/D	1450 S. Bayshore Drive Apt. #814	Miami, Fla.
Higgins, Richard	V/D	1450 S. Bayshore Drive Apt. #1110	Miami, Fla.
Young, Herbert	S/D	1450 S. Bayshore Drive Apt. #1604	Miami, Fla.

7. Registered Agent Information

Name: ~~DE ARELLANO, EDUARDO R.~~ Berman, Neil J.  
 Street Address (Do NOT Use P.O. Box Number): ~~1450 S. BAYSHORE DRIVE~~ 1450 S. Bayshore Drive Apt. 514  
 City, State and Zip Code: ~~MIAMI, FLORIDA 33131~~ Miami, Fla. 33131

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

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: Berman, Neil J. Title: President Telephone Number: 374-6205  
 Signature: *Neil J. Berman* Date: 1/15/79

(Form DOR 520) Rev. 10/25/78 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 8 1980

COMM. DIVISION  
TALLAHASSEE, FLORIDA

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

1. Name and Address of Corporation Principal Office:		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.	
739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		Street Address	
		P.O. Box No.	
		City	
		State	
		Zip Code	

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

3. Date incorporated or Qualified To Do Business in Florida	7/20/1977	4. Federal Employer Identification Number (FEIN)	59-1754406	5. Date of Last Report	1979
---	-----------	--	------------	------------------------	------

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
LAMPHEAR, DENNIS			
<del>XXXXXXXXXX, XXXX</del>	P/D	1450 S. BAYSHORE DR. #51	MIAMI, FL
ALVAREZ, FAUSTA			
<del>XXXXXXXXXX, XXXX</del>	V/D	1450 S. BAYSHORE DR. #51	MIAMI, FL
PARENTI, MICHAEL			
<del>XXXXXXXXXX, XXXX</del>	T/D	1450 S. BAYSHORE DR. #51	MIAMI, FL
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #51	MIAMI, FL

7. Registered Agent Information	
Name	DENNIS. LAMPHEAR
Street Address (Do NOT Use P.O. Box Number)	1450 S. BAYSHORE DR.
City, State and Zip Code	MIAMI, FLORIDA 33131

4-8-80  
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.  
H.C.

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 807 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
Dennis Lamphear	President	373-3100
Signature	Date	
<i>Dennis Lamphear</i>	3-11-80	

DO NOT WRITE IN THIS SPACE

739698 03-24-80 2 6 301 10.00



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

DO NOT WRITE IN THIS SPACE

MAY 3 3 11 1981

**1981**

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

PLEASE STAPLE CHECK TO ANNUAL REPORT

1 Name and Address of Corporation Principal Office.  739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		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 _____	
--	--	--	--

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

3 Date Incorporated or Qualified To Do Business in Florida 7/20/1977	4 Federal Employer Identification Number (FEIN) 59-1754406	5 Date of Last Report 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
LAMPHEAR, DENNIS	P/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
ALVAREZ, FAUSTA	V/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
ARGOMANIZ ENRIQUE	T/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
RECAREY MIGUEL		1450 S. BAYSHORE DR. #514	MIAMI, FL.
		PAID	
		DATE _____	
		CHECK NO. _____	
		AMOUNT _____	

7 Registered Agent Information		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.
Name LAMPHEAR, DENNIS	BY: COSTA BELLA ASSOC.	
Street Address (Do NOT Use P.O. Box Number) 1450 S. BAYSHORE DR.		
City, State and Zip Code MIAMI, FLORIDA 33131		

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 DENNIS LAMPHEAR	Title PRESIDENT	Telephone Number 373-3100
Signature <i>Dennis Lamphear</i>	Date 1-17-81	

DO NOT WRITE IN THIS SPACE  
MAY 15 1981

739698 03-03-81 2 1 271 10.00

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

CORPORATION  
ANNUAL REPORT  
**1982**



George F.resto  
Secretary of State

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

APPROVED

FILED

MAY 24 12 33 PM 1982

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

739698  
COSTA BELLA ASSOCIATION, INC.  
1450 S. BAYSHORE DRIVE  
MIAMI, FLORIDA 33131

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

3 Date Incorporated or Qualified To Do Business in Florida

07/20/1977

4 Federal Employer Identification Number (EIN)

59-1754406

5 Date of Last Report

05/01/1981

6 Names and Street Addresses of Each Officer and Director

Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT use P.O. Box Number)	City and State
LAMPHEAR, DENNIS	P/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
ALVAREZ, FAUSTA	V/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
ARGOMANIZ, ENRIQUE	T/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
RECAREY, MIGUEL	D	1450 S. BAYSHORE DR. #514	MIAMI, FL
KOPEL, BERNARD	P/D	1450 S. BAYSHORE DR. #1114	MIAMI, FL
ARGOMANIZ, ENRIQUE	V/D	1450 S. BAYSHORE DR. #502	MIAMI, FL
LAMPHEAR, DENNIS	T/D	1450 S. BAYSHORE DR. #2009	MIAMI, FL
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #1604	MIAMI, FL
RECAREY, MIGUEL	D	1450 S. BAYSHORE DR. #1207	MIAMI, FL

Registered Agent Information

7 Name and Address of Current Registered Agent

LAMPHEAR, DENNIS  
LAMPHEAR, DENNIS

1450 S. BAYSHORE DR.

MIAMI, FLORIDA

33131

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, I, the undersigned, do hereby certify and affirm that I am the duly authorized person who submits this statement for the purpose of changing its registered office or changing its name or both in the State of Florida.

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

SIGNATURE

(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, 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

Herbert Young

Date

APRIL 8, 1982

Typed Name of Signing Officer

HERBERT YOUNG

Title

SECRETARY / DIRECTOR

Telephone Number

358-3443

12/11/1981

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

CORPORATION  
ANNUAL REPORT  
**1983**



George F. Sunshine  
Secretary of State

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

APPROVED  
SAC  
FILED

APR 14 10 40 AM 1983

Read Notice and Instructions on Other Side Before Making Filing  
Filing Fee of \$10 Required - Make Checks Payable To: SECRETARY OF STATE, FLORIDA

1 Name and Address of Corporation or Principal Office

739698  
COSTA BELLA ASSOCIATION, INC.  
1450 S. BAYSHORE DRIVE  
MIAMI, FLORIDA 33131

If above address is incorrect or if you desire the corporation to be listed in Item 2, include Zip Code

3 Date Incorporated or Qualified To Do Business in Florida

07/20/1977

4 Federal Employer Identification Number

59-1754406

05/24/1982

6 Names and Street Addresses of Each Officer and Director

Name of Officer and Director	Title	Street Address	City	State	Zip
KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL	FL	0000
ARGOMANIZ, ENRIQUE	N/D	1450 S BAYSHORE DR 582	MIAMI, FL	FL	0000
LANPHEAR, DENNIS	N/D	1450 S BAYSHORE DR 2809	MIAMI, FL	FL	0000
RECARREY, MIGUEL	D	1450 S BAYSHORE DR 1207	MIAMI, FL	FL	0000
YOUNG, HERBERT	S/D	1450 S BAYSHORE DR 1604	MIAMI, FL	FL	0000
GALVIS, MIGUEL	D	1450 S. BAYSHORE DR 1510	MIAMI, FL	FL	
RUBIO, MARIO	T	1450 S. BAYSHORE DR. PH1	MIAMI, FL	FL	
ELSASSER, RUTH	A.T/S	1450 S. BAYSHORE DR. 407	MIAMI, FL	FL	

Registered Agent Information

7 Name and Address of Current Registered Agent

LANPHEAR, DENNIS - N  
1450 S BAYSHORE DR

NEIL J. BERMAN  
~~1450 S Bayshore Dr.~~ Brickell Avenue  
MIAMI FLORIDA

9 Pursuant to the provisions of Sections 607.014 and 607.017, Florida Statutes, the undersigned hereby certifies that the information submitted herein is true and correct for the purpose of changing this registered office. It is understood that the filing of this statement does not constitute a representation of the accuracy of the information submitted.

Such change was authorized by resolution duly adopted by the board of directors of the corporation.

SIGNATURE *Neil J. Berman*  
(Registered Agent or Acting Agent)

2/15/83

\$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 and I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect as if Made by the Corporation.

Signature *B. Kopel*

Typed Name of Signing Officer  
BERNARD KOPEL

Title  
PRESIDENT

Feb 13, 1983

373-3100

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

CORPORATION  
ANNUAL REPORT  
**1984**



FLORIDA DEPARTMENT OF STATE  
George F. Armstrong  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

JUN 29 11 32 AM '84

SECRETARY OF STATE

Read Notice and Instructions on Other Side Before Making Entries. L.A. 855.EE. FLORIDA  
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office.		2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.	
739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		Street Address P.O. Box No. City State Zip Code	
If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.			

3. Date Incorporated or Qualified To Do Business in Florida: 07/20/1977	4. Federal Employer Identification Number (FEIN): 59-1754406	5. Date of Last Report: 03/14/1983
---	--	------------------------------------

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 KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL 0
2 YOUNG, HERBERT	S/D	1450 S BAYSHORE DR 1604	MIAMI, FL 0
3 ELSASSER, RUTH	A/T/S	1450 S BAYSHORE DR 407	MIAMI, FL 0
4 RUBIO, MARIO	T	1450 S BAYSHORE DR PH1	MIAMI, FL 0
5 SALVIS, MIGUEL	D/V/P	1450 S BAYSHORE DR 1510	MIAMI, FL 0
ELSASSER, RUTH	V/D	1450 S. BAYSHORE DR. 407	MIAMI, FL
GALVIS, MIGUEL	T/D	1450 S. BAYSHORE DR. 1510	MIAMI, FL

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
BERMAN, NEIL J 444 BRICKELL AVE MIAMI, FL		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: <i>B. Kopel</i>	Date: 6/23/84
Typed Name of Signing Officer: BERNARD KOPEL	Title: President
	Telephone Number: 358-0139

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

SAG 7.23.84

COR 620 (1-84)

ANNUAL REPORT  
1985



Read Notice and Instructions on Other Side Before Making Entry  
Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation  
**COSTA BELLA ASSOCIATION, INC.**  
 1450 S. BAYSHORE DRIVE  
 MIAMI, FLORIDA 33131

3 Date of Incorporation or Date when To Do Business in Florida: **06/29/1984**

4 Name and Street Address of Executive Office

Number	Name of Officer and Directors	Residence	Address	City	State	Zip
1	ELGASSER, RUTH	V/C	1450 S BAYSHORE DR 422	MIAMI	FL	
2	GALVIS, MIGUEL	T/C	1450 S BAYSHORE DR 1520	MIAMI	FL	
3	KOPEL, BERNARD	P/D	1450 S. BAYSHORE DR 1114	MIAMI	FL	33131
4	YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR 1604	MIAMI	FL	33131
5	DORTOL, HENRI G.	T/D	1450 S. BAYSHORE DR 1811	MIAMI	FL	33131
6	DEWITT, ANDREW	D	1450 S. BAYSHORE DR 1011	MIAMI	FL	33131
	GALVIS, MIGUEL	V/D	1450 S. BAYSHORE DR 1510	MIAMI	FL	33131

7 Name and Address of Current Registered Agent  
**BERMAN, NEIL J**  
 444 BRICKELL AVE  
 MIAMI, FL

8 Name and Address of New Registered Agent

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.

I hereby accept the appointment of registered agent I am familiar with and accept the obligations of Sect. 607.031 F.S.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 (Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10 I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Section 607.034. 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: *Herbert Young* Date: **MARCH 28, 1985**

Typed Name of Signing Officer: **HERBERT YOUNG** Title: **SECRETARY**

Telephone Number: **(305)-373-3100/358-7443**

11 Should you desire a certificate of status check the box. CERTIFY DATE OF STATUS DESIRED   
 \$5 additional fee required for a Certificate of Status

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

CORPORATION  
ANNUAL REPORT  
1986



FLORIDA DEPARTMENT OF STATE  
George F. Weisner  
Secretary of State  
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

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

739698 9  
COSTA BELLA ASSOCIATION, INC.  
1450 S. BAYSHORE DRIVE  
MIAMI, FLORIDA 33131

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

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

3 Date Incorporated or Qualified To Do Business in Florida

06-29-1984

4 Federal Employer Identification Number (FEIN)

59-1754406

5 Date of Last Report

04/23/1985

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
KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL 33131
YOUNG, HERBERT	S/D	1450 S BAYSHORE DR 1604	MIAMI, FL 33131 0
DORIOL, HENRI G.	T/D	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0
DEWITT, ANDREW	D	1450 S BAYSHORE DR 1011	MIAMI, FL 33131 0
SALVIS, MIGUEL	V/D	1450 S BAYSHORE DR 1510	MIAMI, FL 33131 0
ARGOMANIZ, ENRIQUE	D	1450 S. BAYSHORE DR. 502	MIAMI, FL 33131

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

BERMAN, NEIL J.  
444 BRICKELL AVE  
MIAMI, FL

8 Name and Address of Next Registered Agent

Name 81  
Street Address (Do NOT Use P.O. Box Number) 82  
City and State 83 FL Zip Code 84

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 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. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE \_\_\_\_\_ (Registered Agent Accepting Appointment)

DATE \_\_\_\_\_

\$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 *B. KopeL*  
Typed Name of Signing Officer B. KOPEL

Title *President*

Date 3/17/86  
Telephone Number 374-1368

11 Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee Required for Certificate of Status

CR6004 (1/85)

**FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987**

**CORPORATION**  
**ANNUAL REPORT**  
**1987**



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

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries  
 Filing Fee of \$75 Required - Make Checks Payable to Secretary of State

1. Name and Address of Corporation Principal Office:

739698  
 COSTA BELLA ASSOCIATION, INC.  
 1450 S. BAYSHORE DRIVE  
 MIAMI, FLORIDA 33131

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: 06/29/1984  
 4. Federal Employer Identification Number (FEIN): 59-1754406  
 5. Date of Last Report: 03/31/1986

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

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	5.
KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL 33131	
YOUNG, HERBERT	T/D	1450 S BAYSHORE DR 1604	MIAMI, FL 33131	0
DONIC, HENRI G. LOPARDO, ALEXANDRA	T/D S/D	1450 S BAYSHORE DR 1811	MIAMI, FL 33131	0
CENEF, MORELL BARCELO, GLADYS	T/D D	1450 S BAYSHORE DR 1011	MIAMI, FL 33131	0
ARMONHIZ, ENRIQUE	D	1450 S BAYSHORE DR 502	MIAMI, FL 33131	0

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GERMAN, NEIL J  
 ONE BISCAYNE TOWER  
 MIAMI, FL 33131

8. Name and Address of New Registered Agent

NAME 81  
 SAME AGENT (MOVED)

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.

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 change.**

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: *B. KopeL* Date: 5/21/87  
 Typed Name of Signing Officer: B. KOPEL Title: President Telephone Number: 373-3100

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

CERTIFICATE OF STATUS DESIRED

**\$5 Additional Fee required for a Certificate of Status**

CIBEXOK (123)

**FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.**

CORPORATION  
ANNUAL REPORT  
1988



FLORIDA DEPARTMENT OF STATE  
Jan 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:

740698  
SHILOH DAY CARE CENTER, INCORPORATED  
4327 15TH AVENUE SOUTH  
ST. PETERSBURG, FL.

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 Above 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

11/04/1977

4. Federal Employer Identification Number (FEIN)

59-1774448

5. Date of Last Report

11/10/1987

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

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SYMON, W. S., REV.	P	230 43RD AVE N.	ST. PETERSBURG, FL.
KOLBY, BETTY	S	863 3RD AVE N.	ST. PETERSBURG, FL.
PAYTON, PAULINE	D	231 CENTRAL AVE	ST. PETERSBURG, FL.
BOYDSTON, BRYAN	D	2600 9TH ST. N.	ST. PETERSBURG, FL.
WILLIAMS, CULLIVER	D	6625-32 WAY, S.	ST. PETERSBURG, FL.
TINN, DALE	D	8410 4TH STREET N.	ST. PETERSBURG, FL.

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent

WASHINGTON, ESTELL  
1934-23RD ST., S.  
ST. PETERSBURG, FL. 33712

8. Name and Address of Agent

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

Zip Code 85

FL

I, 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 607.025 F.S.

SIGNATURE

*Estell Washington*  
(Registered Agent Accepting Appointment)

DATE

3/9/88

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

11. Sign in appropriate notations 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. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer or Director Signature Must Be Signed in Block 6)

Signature

*Estell Washington*  
Typed Name of Signing Officer or Director  
*Estell Washington*  
Title

Date

3/9/88

Telephone Number

(813) 327-2985

12. Should you desire a certificate of status check this 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

DATE: \_\_\_\_\_  
PAGE: \_\_\_\_\_

**Filing Fee of \$25 Required - Make Checks Payable to Secretary of State**

1. Name and Address of Corporation Principal Office:  739699 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131	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
---	--

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

3. Date Incorporated or Qualified to Do Business in Florida: <b>06/29/1984</b>	4. Federal Employer Identification Number (FEIN): <b>59-1754406</b>	5. Date of Last Report: <b>06/09/1987</b>
--	---	---

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987				
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	5.
KOPEL, BERNARD	P/D	1450 S. BAYSHORE DR 1114	MIAMI, FL 33131	
YOUNG, HERBERT	T/D	1450 S. BAYSHORE DR 1604	MIAMI, FL 33131	0
LOPARDO, ALEXSANDRA	S/D	1450 S. BAYSHORE DR <del>1011</del> 1906	MIAMI, FL 33131	0
BARCELO, GLADYS	S/V/P	1450 S. BAYSHORE DR <del>1011</del> 1110	MIAMI, FL 33131	0
ARGOVANIZ, ENRIQUE	D. F. ASST. T/S	1450 S. BAYSHORE DR 502	MIAMI, FL 33131	0

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
BERMAN, NEIL J ONE BISCAYNE TOWER 2, SOUTH BISCAYNE 33131		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 and:

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of, Section 607.025 F.S.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida: \_\_\_\_\_

11. See separate instructions upon 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 Signature must be filed in Block 6)

Signature: B. KopeL Date: 6/6/88  
Typed Name of Signing Officer or Trustee: BERNARD KOPEL Title: PRESIDENT Telephone Number: \_\_\_\_\_

12. 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  
 1989



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

DO NOT WRITE IN THIS SPACE

**FILED**  
 1989 AUG 15 PM 4:13

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:  
 ZIP + 4  
 739698 9  
 COSTA BELLA ASSOCIATION, INC.  
 1450 S. BAYSHORE DRIVE  
 MIAMI, FLORIDA 33131-3612

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number, Also if NOT Significant  
 08/16/89 00000 023  
 Street Address 21  
 P.O. Box No. 22  
 ANNUAL REPORT  
 ANNUAL REPORT 35.0  
 City and State 23  
 TOTAL 35.0  
 Zip Code 24

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

3. Date Incorporated or Qualified to Do Business in Florida: 05/29/1984  
 4. Federal Employer Identification Number (FEIN): 59-1754406  
 5. Date of Last Report: 08/15/1988

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

1	2	3	4	5
	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
1	<del>ROPER, DONALD</del>	<del>1450 S BAYSHORE DR 1114</del>	MIAMI, FL 33131	
2	<del>PERE, SOFF</del>	<del>1450 S BAYSHORE DR 1906</del>	MIAMI, FL 33131	0
3	YOUNG, HERBERT	1450 S BAYSHORE DR 1604	MIAMI, FL 33131	0
4	<del>LOPARDI, ALEXANDRA</del>	<del>1450 S BAYSHORE DR 1906</del>	MIAMI, FL 33131	0
5	BARCELO, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131	0
6	<del>ARGOMANIZ, ENRIQUE</del>	<del>1450 S BAYSHORE DR 502</del>	MIAMI, FL 33131	0
7	GERARD DOEOL	1450 S BAYSHORE DR 1011	MIAMI, FL 33131	
8	GISELA WEBBER	1450 S BAYSHORE DR 301	MIAMI, FL 33131	

**REGISTERED AGENT INFORMATION**

7. Name and Address of Client Registered Agent:  
 BERMAN, NEIL J.  
 ONE BISCAYNE TOWER  
 2 SOUTH BISCAYNE  
 MIAMI, FL 33131

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 607.031 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 607.025 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 Recorder 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: Gladys Barcelo Date: 6/29/89  
 Typed Name of Signer: Officer or Director: GLADYS BARCELO Title: PRESIDENT Telephone Number: (305) 272-3100

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

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

PS0123440

701

CORPORATION  
ANNUAL REPORT  
1990



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

DO NOT WRITE IN THIS SPACE

SECRET - 100000

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.

739698 9

ZIP + 4 PRESORT

COSTA BELLA ASSOCIATION, INC.  
1450 S. BAYSHORE DRIVE  
MIAMI, FLORIDA 33131-3612

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 06/29/1984

4. FEI Number 59-1754406

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.)

1	2	3	4	5
Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
1x	V/D SOPP, PEER	1450 S BAYSHORE DR 1900	MIAMI, FL 33131	
2	T/D YOUNG, HERBERT	1450 S BAYSHORE DR 1604	MIAMI, FL 33131 0	
2x	P/D BARCELO, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131 0	
3	S/D DORIOL, GERARD	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0	
4x	A/T/S WEBBER, GISELA	1450 S BAYSHORE DR 901	MIAMI, FL.	
5x	(MARGA) MARGA ROBERT	1450 S. BAYSHORE DR 1505 MIAMI, FL 33131		
6x	OHALAKANI JOHN	1450 S. BAYSHORE DR 609 MIAMI, FL 33131		

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
BERMAN, NEIL J DE LA TORRE, HELIO ONE BISCAYNE TOWER 201 ALHAMBRA CIRCLE 2 SOUTH BISCAYNE SUITE 1102 MIAMI, FL 33131 CORAL GABLES, FL 33134		Name of HELIO DE LA TORRE Street Address 1 (Do NOT Use PO Box Number, 82) 201 ALHAMBRA CIRCLE Street Address 2 (Do NOT Use PO, Box Number) 83 SUITE 1102 City and State 84 CORAL GABLES FL Zip Code 85 33134	

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 FS.

SIGNATURE \_\_\_\_\_ (Registered Agent Accepting Appointment)

DATE \_\_\_\_\_

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, FS.

Signature \_\_\_\_\_

Date 7/1/90

Typed Name of Signing Officer or Director

GLADYS BARCELO

Title

PRESIDENT

Telephone Number \_\_\_\_\_

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

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee  
Examined for  
Certificate of Status

**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

RJL-991

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

**FILING FEE OF \$61.25 REQUIRED**

DO NOT WRITE IN THIS SPACE.

1. Name and Mailing Address of Corporation: **DOCUMENT #739533 (9)**

**COSTA BELLA ASSOCIATION, INC.  
1450 S. BAYSHORE DRIVE  
MIAMI, FLORIDA 33131-3612**

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

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

3. Date Incorporated or Qualified To Do Business in Florida <b>08/29/1984</b>	4. FEI Number <b>59-1754406</b>	FEI Number Applied For	5. <b>\$8.75 Additional Fee required for a Certificate of Status</b>
		FEI Number Not Applicable	CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>

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

1	2	3	4
Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
<del>T/D</del>	<del>YOUNG, HERBERT</del>	<del>1450 S BAYSHORE DR 1804</del>	<del>MIAMI, FL 33131 0</del>
P/D	BARCELO, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131 0
S/D	DORIOL, GERARD	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0
D	HENRIQUEZ, RENE	1450 S. BAYSHORE DR 711	MIAMI, FL 33131
T/D	CHALAKANI, JOHN	1450 S. BAYSHORE DR 609	MIAMI, FL 33131

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent <b>DE LA TORRE, HELIO 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES, FL. 33134</b>	8. Name and Address of Next Registered Agent
	81. Name
	82. Street Address 1 (Do NOT Use PO Box Number)
	83. Street Address 2 (Do NOT Use PO Box Number)
	84. City
	85. Zip Code

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 \_\_\_\_\_ 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 effect as if made under oath. I further certify that I am an officer or director of the corporation or the secretary 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 <i>Gladys M. Barcelo</i>	DATE <b>3/5/91</b>
Typed Name of Signing Officer or Director <b>Gladys M. Barcelo</b>	Title <b>President</b>
	Telephone Number (Daytime) <b>(305) 373-3100</b>

**FILING FEE OF \$61.25 REQUIRED - Make Checks Payable To: Secretary of State** **\$8.75 Additional Fee required for a Certificate of Status**

CRESTOCK (1991)

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

CORPORATION  
ANNUAL REPORT  
1992



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

JUL 27 1992

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

**FILING FEE \$61.25 Make Payable To: Secretary of State**

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT #739698 (9)**  
**COSTA BELLA ASSOCIATION, INC.**  
**1450 S. BAYSHORE DRIVE**  
**MIAMI FL 33131-3612**

If above address is incorrect 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: **06/29/1984**

3a. Date of Last Report: **07/09/1991**  
4. FEI Number: **59-1754406**  
FEI Number Applied For:   
FEI Number Not Applicable:   
5. **\$8175 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	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1 T/D	CHALAKANI, JOHN	1450 S BAYSHORE DR 604	MIAMI, FL 33131 0
2 P/D	BARCELO, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131 0
3 S/D	DORIOL, GERARD	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0
4 D	HENRIQUEZ, RENE	1450 S BAYSHORE DR 711	MIAMI, FL
5			
6			

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent  
**DE LA TORRE, HELIO**  
**201 ALHAMBRA CIRCLE**  
**SUITE 1102**  
**CORAL GABLES, FL. 33134**

8. Name and Address of Non-Registered Agent  
81 Name  
82 Street Address 1 (Do NOT Use P.O. Box Numbers)  
83 Street Address 2 (Do NOT Use P.O. Box Numbers)  
84 City  
85 Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment)

10. This Corporation has liability for intangible tax under S. 190.032, 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. 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 of Chapter B17, Florida Statutes, and that my name appears in Block 6 or an attachment with an address.

SIGNATURE *Glady's M. Barcelo* DATE **6/22/92**  
Typed Name of Signing Officer or Director: **GLADYS M. BARCELO** Title: **VICE-PRESIDENT** Telephone Number (Daytime): **(305) 373-3100**

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee.

CR0304 (1/91)

File Now. Filing Fee after May 1 is \$225.00

APPROVED  
AND  
FILED

93 MAY -1 PM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1993



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

1. Name and Mailing Address of Corporation: **DOCUMENT # 739698 (9)**

**COSTA BELLA ASSOCIATION, INC.**  
1450 S BAYSHORE DR  
MIAMI FL 33131-3617

DO NOT WRITE IN THIS SPACE

2. Mailing Address  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Principal Place of Business  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified: **06/29/1984**  
3a. Date of Last Report: **07/22/1992**

4. FEI Number: **591754406**  
Applied For:  Not Applicable:

5. Certificate of Status Desired:  \$6.75 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. This corporation has liability for intangible tax under S. 199.032, Fla. Statutes:  Yes  No

9. Name and Address of Current Registered Agent

**DE LA TORRE, HELIO**  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

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

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 the information 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 and I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0255, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

1.1 TITLE	1.2 NAME	1.3 ADDRESS	1.4 CITY - ST - ZIP
VP/D	BARCELÓ, JOHN	1450 S BAYSHORE DR 604	MIAMI, FL 33131 0
VP/D	BARCELÓ, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131 0
S/D	DORIOL, GERARD	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0
<del>VP/D</del>	<del>NEWBOLD, WENE</del>	<del>1450 S BAYSHORE DR 744</del>	<del>MIAMI, FL 33131 0</del>

13. OFFICERS AND DIRECTORS CHANGES

2.1 TITLE	2.2 NAME	2.3 ADDRESS	2.4 CITY - ST - ZIP
CHAIRMAN/D	CHALAKANI, JOHN	1450 SE BAYSHORE DR. #604	MIAMI, FL 33131
VICE PRESIDENT/D	BARCELÓ, GLADYS	1450 SE BAYSHORE DR. #1207	MIAMI, FL 33131
SECRETARY/D	DORIOL, GERARD	1450 SE BAYSHORE DR #1811	MIAMI, FL. 33131
DIRECTOR	HAKSPIEL, MAURICE	1450 SE BAYSHORE DR #910	MIAMI, FL. 33131
DIRECTOR	WHITE, WILLIAM	1450 SE BAYSHORE DR. #314	MIAMI, FLORIDA 33131

14. I certify that the information included 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. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12, Block 13 or on an attachment with an address.

SIGNATURE: John Chalakani DATE: 2/19/93  
 Print Name of Signing Officer or Director: John Chalakani Title: Chairman Daytime Telephone Number: (305) 373-3100

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

APPROVED AND FILED

94 MAY -1 PM 2:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1994



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

1. Corporation Name <b>COSTA BELLA ASSOCIATION, INC.</b>		DOCUMENT # <b>739698 (9)</b>	
2. Mailing Address <b>1450 S. BAYSHORE DRIVE MIAMI FL 33131-3612</b>		3a. Principal Place of Business <b>1450 S. BAYSHORE DRIVE MIAMI FL 33131-3612</b>	
If above addresses are incorrect in any way, file through incorrect information and enter correction below.			
2. Mailing Address	2a. Principal Place of Business	3. Date Incorporated or Qualified <b>06/29/1984</b>	3a. Date of Last Report <b>05/01/1993</b>
21. State, Apt. #, etc.	26. State, Apt. #, etc.	4. FEI Number <b>59-1754406</b>	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <b>\$3.75 Additional Fee Required</b> <input type="checkbox"/>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>
23. Zip	28. Zip	7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24. Country	29. Country	8. This corporation has liability for intangible tax under § 130.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

DO NOT WRITE IN THIS SPACE

9. Name and Address of Current Registered Agent <b>DE LA TORRE, HELIO 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES FL 33134</b>		10. Name and Address of New Registered Agent	
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City
			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 607.0503 or 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE <b>C/D</b>	<b>CHALAKANI JOHN</b>	11. TITLE	
12. NAME		12. NAME	
13. STREET ADDRESS <b>1450 SE BAYSHORE DRIVE #604</b>		13. STREET ADDRESS	
14. CITY-ST-SP <b>MIAMI, FL 33131 0</b>		14. CITY-ST-SP	
21. TITLE <b>P/D</b>	<b>BARCELO, GLADYS</b>	21. TITLE	<b>VICE PRESIDENT</b>
22. NAME		22. NAME	
23. STREET ADDRESS <b>1450 SE BAYSHORE DRIVE #1207</b>		23. STREET ADDRESS	
24. CITY-ST-SP <b>MIAMI, FL 33131 0</b>		24. CITY-ST-SP	
31. TITLE <b>S/D</b>	<b>DORJOL, GERARD</b>	31. TITLE	
32. NAME		32. NAME	
33. STREET ADDRESS <b>1450 SE BAYSHORE DRIVE #1811</b>		33. STREET ADDRESS	
34. CITY-ST-SP <b>MIAMI, FL 33131 0</b>		34. CITY-ST-SP	
41. TITLE <b>D</b>	<del><b>HAKSIEL MAURICE</b></del>	41. TITLE	
42. NAME		42. NAME	
43. STREET ADDRESS <del><b>1450 SE BAYSHORE DRIVE #910</b></del>		43. STREET ADDRESS	
44. CITY-ST-SP <del><b>MIAMI FL</b></del>		44. CITY-ST-SP	
51. TITLE <b>D</b>	<del><b>WHITE WILLIAM</b></del>	51. TITLE	
52. NAME		52. NAME	
53. STREET ADDRESS <del><b>1450 SE BAYSHORE DRIVE #611</b></del>		53. STREET ADDRESS	
54. CITY-ST-SP <del><b>MIAMI FL</b></del>		54. CITY-ST-SP	
61. TITLE		61. TITLE	
62. NAME		62. NAME	
63. STREET ADDRESS		63. STREET ADDRESS	
64. CITY-ST-SP		64. CITY-ST-SP	

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 117.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 118.07(3)(a), the extent 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 accurate and that my signature shall have the same legal effect as if made under oath. I have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes, that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report or reports of Chapter 717, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or on an attachment, with an address.

SIGNATURE: John Chalakani 4/30/99 373-3100  
SIGNATURE AND FILED OR PRINTED NAME OF SENIOR OFFICER OR DIRECTOR