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Feb 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # 756302 (6)

1. Corporation Name

MIAMI BEACH DEVELOPMENT CORPORATION, INC.

Principal Place of Business	Mailing Address
1205 DREXEL AVENUE. 2ND FL. MIAMI BEACH FL 33139-8207	1205 DREXEL AVENUE. 2ND FL. MIAMI BEACH FL 33139-8207

3. Date Incorporated or Qualified: 02/10/1981
3a. Date of Last Report: 07/10/1996

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 59-2110264 ☐ Applied For ☐ Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

RUSS, DENIS A
1205 DREXEL AVE. 2ND FLOOR
MIAMI BEACH FL FL 33139

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 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 617.0503, 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	SD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HART, WENDY		1.2 NAME		
STREET ADDRESS	755 W 50TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MB FL		1.4 CITY-ST-ZIP		
TITLE	VD	☒ DELETE	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	GROSS, SAUL		2.2 NAME	Scott Robins	
STREET ADDRESS	2900 FLAMINGO DR		2.3 STREET ADDRESS	1220 Collins Avenue, #310	
CITY-ST-ZIP	MIAMI BEACH FL 33140		2.4 CITY-ST-ZIP	Miami Beach, Fl 33139	
TITLE	CD	☐ DELETE	3.1 TITLE	VD	☐ Change ☒ Addition
NAME	DATORRE, ROBERTO		3.2 NAME	Betty Gutierrez	
STREET ADDRESS	4887 PINE TREE DR.		3.3 STREET ADDRESS	344 Meridian Ave, #410	
CITY-ST-ZIP	MIAMI BEACH FL		3.4 CITY-ST-ZIP	Miami Beach, Fl 33139	
TITLE	P	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	RUSS, DENIS		4.2 NAME		
STREET ADDRESS	1004 TENTH STREET		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		4.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	DIAZ, JR. V		5.2 NAME		
STREET ADDRESS	275 DE LIBO DR		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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: Wendy Hart ELECTRONICALLY FILED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0027440