FILE NOW: FILING FEE IS \$61.25

SIGNATURE:

Jun 11 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 POCUMENT # N93000003227 (6) SHELBORNE OCEAN BEACH HOTEL CONDOMINIUM ASSOCIAT ION, INC. Mailing Address Principal Place of Business 1801 COLLINS AVE 1801 COLLINS AVE 3. Date Incorporated or Qualified MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 07/16/1993 4. FEI Number Applied For 65-0427809 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc Suite, Apt. #, etc. 8. Election Campaign Financing \$5.00 May Be Added to Fees 22 27 Trust Fund Contribution City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes 30 Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GRS MANAGEMENT OF BROWARD INC Street Address (P.O. Box Number is Not Acceptable) 4431 SW 64TH AVENUE. SUITE 113 83 DAVIE FL 33314 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1097 12. 13. DELETE Change X Addition TITLE 1.1 TITLE PD AGUILA, PERCY JR REIBEL, ALBERT 1.2 NAME NAME 1801 COLLINS AVE., APT T11 1.3 STREET ADDRESS 1801 COLLINS AVE STREET ADDRESS MIAMI BEACH FL MIAMI BEACH FL 33139 CITY-ST-ZIP 1.4 CITY-ST-ZIP **DELETE** Change Addition TITLE 2.1 TITLE PERCY AGUILA, JR. NAME 2.2 NAME 1801 COLLINS AVENUE, APT. T11 STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3 1 TILLE NIN, BAUDILIO NAME 3.2 NAME **1801 COLLINS AVENUE** STREET ADDRESS 3.3 STREET ADDRESS MIAMI BEACH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ■ Addition TITLE WEINTRAUB, STUART 4 2 NAME NAME **1801 COLLINS AVE** 4.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 4.4 CITY-S1-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this annual ropor of supplimental annual roccurrence and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the compression of the

ALBERT PEIBE

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