AMEND

**2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P02000118281

1. Entity Name

SOUTH BAYSHORE TOWER DEVELOPMENT, INC.



Mailing Address

1000 BRICKELL AVE., SUITE 720 MIAMI, FL 33131

2. Principal Place of Business

Miami, Florida

Suite, Apt. #, etc.

Süite 900

City & State

33131

25 S.E. 2nd Avenue

Principal Place of Business

1000 BRICKELL AVE., SUITE 720 MIAMI, FL 33131

25 S.E 2nd Avenue

Miami, Florida

3. Mailing Address

Suite, Apt. #, etc.

Suite 900

City & State

Ζip

33131

X CHECK HERE IF MAKING CHANGES

13-4221176

03 OCT -3 AMII: 31

SECRETARY OF STATE TALLAHASSEE. FLORIDA

7. Name and Address of New Registered Agent

Applied For Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

US.

HAWLEY, XAVIER 1000 BRICKELL AVE., SUITE 720 MIAMI, FL 33131

Name Rene V.~ Murai

Street Address (P.O. Box Number Is Not Acceptable)
25 S.E. 2nd Avenue, Sulling 900

Suite 900

Miami

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Murai Wald Biondo & Moreno, P.A.8/27/03 SIGNATURE

Country

US

Signature/specior primed name of recitated agent and the lapping the Rene V. Murai. President

FILE NOW!! FEE IS \$150.00.

After May !; 2003 Fee will be \$550.00.

Amended UBR is \$61.25.

Make Chack Payable to Florida Department of State

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing

Trust Fund Contribution,

\$5.00 May Be Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Delete Change [ Addition TITLE TITLE President and Secretary HAWLEY, XAVIER NAMÉ MALIF Kenneth Baboun STREET ADDRESS 1000 BRICKELL AVE., SUITE 720 STREET ADDRESS 25 S.E. 2nd Avenue, Suite 900 Miami, Fl. 33131 MIAMI, FL 33131 CITY-ST-2P CITY-ST-7(P TITLE .... Delete TITLE ☐ Change Addition NAME NAME 000023516410 10/02/03--01072--007 \*\*61 STREET ADDRESS STREET ADDRESS \*\*61.25 CITY-ST-ZP CITY-ST-ZIP TITLE TITLE Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-2IP ■ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition

CffY-S1-21P 12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZP

CITY-ST-7P

TITLE

NAMÉ

☐ Delete

☐ Change

☐ Addition