FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🗼

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000041600 (2)

CORNERSTONE SIESTA POINTE, INC.

FILED Mar 27 1998 8:00am Secretary of State



Principat Plac	e of Business								
2121 PONCE DE LEON BLVD SUITE 650 2121 PONCE DE LEON BLVD CORAL GABLES FL 33134 CORAL GABLES FL 33134				E 650	DO NOT WRITE I	N THIS SPACE	Ē		
					 Date Incorporated or Qualified 05/09/1997 				
2. Principal Place of Business 21 21 21 20 16 20 17 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18				2 Hon	4. FEI Number			plied For Applicat	le
Suite, Apt # etc. Suite Apt. #, etc. 22 UNINULU II 27 PL MAWS				<u> </u>	5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State City & State Color & City & State Color & City & State				6. Election Campaign Financing \$5.00 Trust Fund Contribution			5.00	May Be	┪
Zip 33/2	Country 25	29 33134	Cou	intry	This corporation owes or has paid Personal Property Tax due June 3	the current ye	ear Inte		
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Reg	stered Agent			\exists
WC	OLFE, LEON J			81 Name			_		
	TH FLOOR, INTERNATIONAL F			62 Street Add	ress (P.O. Box Number is Not Acceptable				\dashv
	SOUTHEAST SECOND STRE	ET				· —			_
MIA	AMI FL 33131-2130			83					J
				84 City	······································	85	Zip C	ode	ᅱ
44 Purcuont	to the provisions of Sections 607 (1502 and 607 1509. Florida Statut	os the el	cove samed sor	poration submits this statement for the pu	FL Thomas	ning ita	ropidoro	
office or r	registered agent, or both, in the St am familiar with, and accept the ob-	ate of Florida. Such change was a	authorize	d by the corpora	tion's board of directors. I hereby accept	the appointme	ent as r	egistered	1
SIGNATURE	Signature, typed or printed name of registered	MOT and tille 4 nearly able (AIOT	E: Donieloro	Agent signature requi	trort when relegiation)	DATE			- 1
12.		AND DIRECTORS	13.	s without mitting and or	ADDITIONS/CHANGES TO OFFICE		CTORS	S IN 12	ᅰ
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NAME	MEYERS, STUART I		1.2 N/	AME.		_			
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CITY-ST-ZIP	CORAL GABLES FL 33134		1.4 CI	TY-ST-ZIP					[3
TITLE	D	☐ DELETE	2.1 11	rle		☐ CI	nange	Additi	'n
NAME	LOPEZ, JORGE		2.2 N	ME					
STREET ADDRESS	2121 PONCE DE LEON BL	VD SUITE 650	2351	REET ADDRESS					
CITY-ST-ZIP	CORAL GABLES FL 33134		2 4 C	ITY-ST-ZIP		-4 -			
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NAME			3.2 N/	ME .					- }
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NAME			4. 2 N	AME					
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NAME			5.2 N/	ME					
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THTLE		DELETE	6.1 717	ILE		∐ Cr	nange	Addition Addition	n
NAME			6.2 NA	ME					İ
STREET ADDRESS			6.3 \$1	REET ADDRESS					
CITY-ST-ZIP				TY-ST-ZIP					
 14. I hereby of indicated 	certify that the information supplied on this annual report or suppleme	with this filing does not qualify for ntall annual report is true and acc	or the executate and	mption stated in that my signatu	Section 119.07(3)(i), Florida Statutes. I fure shall have the same legal effect as if n	irther certify th	at the i	nformation	۱ [

officer or director of his promote an accorded and accorded and material signature shall have the same legal effect as it made those outer out, that I am a officer or director of the corporation or the recoiler of trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

orge Lovez