## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Mar 09, 2004 8:00 am **Secretary of State** DOCUMENT # P97000107563 1. Entity Name 03-09-2004 90025 043 \*\*\*150.00 SAWGRASS HOTEL, INC. Principal Place of Business Mailing Address 848 BRICKELL AVE **PENTHXISKX** Suite 700 MIAMI FL 33131 848 BRICKELL AVE **330190**000 PENTHOUSE I MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0826791 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MURAI, WALD, BIONDO & MORENO, PA Street Address (P.O. Box Number is Not Acceptable) 900 INGRAHAM BUILDING 25 SOUTHEAST 2ND AVENUE MIAMI FL 33131 Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITI F ☐ Change ☐ Addition MUNOZ, GONZALO NAME NAME 848 BRICKELL AVE, STE 1000 STREET ADDRESS STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP CITY-ST-ZIP XI Delete ☐ Change TITLE TITLE Addition COURET, J NAME NAME 848 BRICKELL AVE, STE 1000 STREET ADDRESS STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition ARDID, JOSE 848 BRICKELL AVE STE XXXX 700 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP Delete Change ☐ Addition ARDID, INIGO NAME 848 BRICKELL AVE STE X008 STREET ADDRESS STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE DIEGO, ARDID NAME NAME 700 848 BRICKELL AVE, STEXINOX STREET ADDRESS STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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.

March 3, 2004

(305) 377-1001

Daytime Phone #

Diego Ardid Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED