FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

APPROVED AND FILED

96 MAY -1 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **522631** **(1)**

1. Corporation Name

101 N.E. SECOND AVENUE PROPERTIES CORP.

Principal Place of Business

100 SE SECOND ST., SUITE 2100
MIAMI FL 33131

Mailing Address

100 SE SECOND ST., SUITE 2100
MIAMI FL 33131

3. Date Incorporated or Qualified: **12/24/1976**

3a. Date of Last Report: **06/08/1995**

2. Principal Place of Business
21 **2300 CORAL WAY**
Suite, Apt. #, etc.
22 **SUITE # 200**
City & State
23 **MIAMI FLORIDA**
24 Zip **33145** 25 Country **US.**

2a. Mailing Address
26 **2300 CORAL WAY**
Suite, Apt. #, etc.
27 **SUITE # 200**
City & State
28 **MIAMI FLORIDA**
29 Zip **33145** 30 Country **US.**

4. FEI Number: **59-1707984** ☐ 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

SOLOWSKY, JAY
100 SE SECOND ST.
SUITE 2100
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: **FLORIDA ANNUAL REPORT SERVICES INC.**
82 Street Address (P.O. Box Number is Not Acceptable): **2300 CORAL WAY SUITE # 200**
83
84 City: **MIAMI** **FL** 85 Zip Code: **33145**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: AMADA CANTERA LOPEZ.PRES — DATE:

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GUTMAN, SALOMON		1.2 NAME	20000161512
STREET ADDRESS	2645 PINETREE DR.		1.3 STREET ADDRESS	-05/08/96--01066--001
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP	****200.00 ****200.00
TITLE	ST	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GUTMAN, GENA		2.2 NAME	
STREET ADDRESS	2645 PINETREE DR.		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			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	

AM 5/3

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ PRES. — 4/30/96

SALOMON GUTMAN — TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)