

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 739337 (4)

1. Corporation Name

DOWNTOWN MIAMI PARTNERSHIP, INC.

Principal Place of Business

25 S.E. SECOND AVENUE
SUITE 825
MIAMI FL 33131
US

Mailing Address

25 S.E. SECOND AVENUE
SUITE 825
MIAMI FL 33131
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22 Suite # 1007

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27 Suite # 1007

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

06/13/1977

3a. Date of Last Report

01/30/1995

4. FEI Number

59-1743641

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

KAPUSTIN, RAFAEL
25 S.E. SECOND AVENUE
SUITE 825
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

☐ DELETE

NAME

KAPUSTIN, RAFAEL
25 S.E. 2ND AVENUE
MIAMI FL 33131

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

☐ DELETE

NAME

PARDO, GEORGINA
25 SE 2ND AVENUE, #825
MIAMI FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

☒ DELETE

NAME

MAYER, DOUG
25 S.E. 2ND AVENUE
MIAMI FL 33131

STREET ADDRESS

CITY - ST - ZIP

TITLE

TD

☐ DELETE

NAME

BEHAR, YOSHUA SAL
25 SE 2 AVENUE, #825
MIAMI FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

SO

☐ DELETE

NAME

ROQUE, RAQUEL
25 S.E. 2ND AVENUE
MIAMI FL 33131

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

☐ DELETE

NAME

ROK, SERGIO
25 SE 2 AVENUE
MIAMI FL

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D

☒ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☒ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

1007

3.1 TITLE

D

☐ Change

☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

Salzverg, Danny
25 S.E. 2 Avenue
Miami FL 33131

4.1 TITLE

☒ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

1007

5.1 TITLE

PD

☒ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAQUEL ROQUE

Date

Daytime Phone #

CR2E037 (12/95)