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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M44214

(8)

ADORNO & ZEDER, P.A.

Principal Place of Business Mailing Address 2801 S. BAYSHORE DRIVE SUITE 1800 2601 S. BAYSHORE DRIVE SUITE 1600 MIAMI FL 33133-5413 MIAMI FL 33133 3. Date Incorporated or Qualified 3a. Date of Last Report 12/30/1986 04/23/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 59-2746043 Not Applicable 26 21 Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country $Z_{\rm ID}$ 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name GOODKIND, BRIAN K. 2601 S BAYSHORE DR Street Address (P.O. Box Number is Not Acceptable) 82 STE 1600 83 **MIAMI FL 33133** Zip Code 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition DP 1.1 TITLE THILE ADORNO, HENRY N. NAME 1.2 NAME 2601 S BAYSHORE DR. 1600 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CHY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition STD 2.1 TITLE TITLE GOODKIND, BRIAN K. NAME 2.2 NAME 2601 S BAYSHORE DR. 1600 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL** CHY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change ☐ Addition VD TITLE 3.1 TITLE BLOOMBERG MITCHELL R. NAME 3.2 NAME 2601 S BAYSHORE DR. 1600 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 3.4. CITY - ST- ZIP CITY: ST-ZIP DELETE Change Addition 4.1 TITLE TITLE ZEDER, JON W. 4. 2 NAME NAME 2601 S BAYSHORE DR. 1600 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE Change 5.1 TITLE TITLE YOSS, GEORGE T. NAME 5.2 NAME 2601 S BAYSHORE DR. 1600 STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL 5.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-7P

STREET ADDRESS

CITY-ST-ZIF

Till F

NAME

DELETE

6.1 TITLE 62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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 corperation 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 Bloc

Brian K. Goodhind, Secretary 2/11/97

Change

Addition

FILED

Feb 19 1997 8:00am

Secretary of State