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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000002857

1. Corporation Name

Principal Place of Business

PEEBLES ATLANTIC DEVELOPMENT CORPORATION

100 SE 2ND ST SUITE 4650 100 SE 2ND ST SUITE 4650 MIAMI FL 33131 MIAMI FL 33131					DO NOT WRITE IN THIS S 3. Date Incorporated or Qualifed 05/20/1998	SPACE	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	-17	Applied For
21	acc of business	26	Maning / Marsos		52-1878092		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				_ \$8.75 Additional			Additional
22					5. Certifcate of Status Desired	Fee	Required
City & State City & State			6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution	Adde	to Fees
Zip	Country	Zip Co	ountry	'	8. This corporation owes the current year Intangible		
24	25	29 30			Tersorial Froporty Tax.	Yes	□No
Name and Address of Current Registered Agent					10. Name and Address of New Registered A	\gent_	
			81	Name			
TACHMES, ALEXANDER I 100 SE 2ND ST. SUITE 4650			82	Street	Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33131			83	 			
1000			L				
			84	City	FL	85 Zij	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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		١		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	☐ DELETE 1.1	TITLE			Chang	Addition
NAME	PEEBLES, R. D	. 1.2	NAME				
STREET ADDRESS	100 SE 2ND ST., SUITE 4650	1.3	STREET	TADDRESS			ſ
CITY-ST-ZIP	1410 Jun 1 E 00 10 1		спу-ѕ	T-ZIP			
TITLE	VSD	X DELETE 2.11			Exec. Vice President	Chang	Addition
NAME	PEEBLES, KATRINA	2.2	NAME		Richard Matlof		(
STREET ADDRESS	100 SE 2ND ST., SUITE 4650	2.3	STREE	TADDRESS	100 SE 2nd. St., #4650		
CITY-ST-ZIP	MIAMI FL 33131		CITY-S	ST-ZIP_	Miami, FL. 33131		
TITLE	T	X DELETE 3.1	TITLE		Treasurer	Chang	e Addition
NAME	POWERS, AMY	3.2	NAME		Rene Lopez-Duprey		}
STREET ADDRESS	100 SE 2ND ST., SUITE 4650	33	STREE	TADDRESS	100 SE 2nd. St. #4650		ĺ
CITY-ST-ZIP	MIAMI FL 33131		CITY-S	ST-ZIP	Miami, FL. 33131		TT + Julian
TITLE		-	TITLE		Secretary	☐ Chang	e XAddition
NAME		4.2	NAME		Michelle Kohler		}
STREET ADDRESS		4.3	STREE	TADDRESS	100 SE 2nd. St. #4650		
CITY-ST-ZIP	·		CITY-S	T-ZIP	Miami, FL. 33131		57.42
TITLE			TITLE		•	☐ Chang	e 🗍 Addition
NAME		5.2	NAME				

14. Thereby 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 supplymental 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 receiper 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 changes, or on an attachment with an address, with all other like empowered.

☐ DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

R Donahue Peebles

4-28-99

305 995-5330

☐ Change

Addition

CR2E034 (11/98)

FILED

May 06, 1999 8:00 am Secretary of State

05-06-1999 90132 002 ***150.00