2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 8:00 am
Secretary of State
02-16-2004 90046 005 ***150.00

DOCUMENT # P97000021990

1. Entity Name
1410 OCEAN DRIVE, INC.

Principal Place of Business	Mailing Address
1238 COLLINS AVE MIAMI BEACH, FL 33139	1238 COLLINS AVE MIAMI BEACH, FL 33139

02122004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
	1111 Lincoln Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite 400
City & State	City & State Miami Beach, FL
Zip / Country	Zip 33139 / Country USA

4. FEI Number 65-0743825 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEINBERG, JAY
1238 COLLINS AVE
MIAMI BEACH, FL 33139

7. Name and Address of New Registered Agent

Name: Weinberg, Jay
Street Address (P.O. Box Number is Not Acceptable): 1111 Lincoln Rd #400
City: Miami Beach FL Zip Code 33139

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 ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WEINBERG, JAY 1238 COLLINS AVE MIAMI BEACH, FL 33139 ☐ Delete	☑ Change ☐ Addition 1111 Lincoln Rd #400 Miami Beach, FL 33139
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WEINBERG, SCOTT 1238 COLLINS AVE MIAMI BEACH, FL 33139 ☐ Delete	☑ Change ☐ Addition 1111 Lincoln Rd #400 Miami Beach, FL 33139
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition

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.

SIGNATURE: [signature], V.P Scott Weinberg 2/12/04 305 5386361.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #