2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 582528

Entity Name: 300 - 500 BAYVIEW, INC.

Current Principal Place of Business:

C/O OFFICE

500 BAYVIEW DRIVE

SUNNY ISLES BEACH, FL 33160-4748

Current Mailing Address:

C/O OFFICE

500 BAYVIEW DRIVE

SUNNY ISLES BEACH, FL 33160-4748

FEI Number: 59-1837869 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAREN SUAREZ CAM - PROP. MG 500 BAYVIEW DRIVE MANAGEMENT OFFICE SUNNY ISLES BEACH, FL 33160 US

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.

SIGNATURE: KAREN SUAREZ 03/07/2018

Electronic Signature of Registered Agent Date

Title

Officer/Director Detail:

Title PRES Title VF

Name HALEY, KATHY Name THOMAS, KEVIN
Address 500 BAYVIEW DR Address 300 BAYVIEW DRIVE

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

Title P Title S

Name FEINBERG, PETER Name GALLINELLI, DEBORAH

Address 300 BAYVIEW DRIVE Address C/O OFFICE

500 BAYVIEW DRIVE

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160-4748

Title VP

Name BOVELNIAK, SIMON Name RICH, QUEENIE
Address C/O OFFICE

500 BAYVIEW DRIVE Address C/O OFFICE

300 BAYVIEW DRIVE

City-State-Zip: SUNNY ISLES BEACH FL 33160-4748 City-State-Zip: SUNNY ISLES BEACH FL 33160-4748

Title 2ND VICE PRES Title TREASURER

Name MARZIGLIANO, LEONARD Name DIEZ, JOHN PAUL

Address C/O OFFICE Address C/O OFFICE

300 BAYVIEW DRIVE Address C/O OFFICE 300 BAYVIEW DRIVE

City-State-Zip: SUNNY ISLES BEACH FL 33160-4748 City-State-Zip: SUNNY ISLES BEACH FL 33160-4748

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SECRETARY

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KATHY HALEY PRES 03/07/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 07, 2018

Secretary of State

CC8503773796

Officer/Director Detail Continued:

Title TREASURER

Name CORCORAN, ALLAN Address 500 BAYVIEW DRIVE

2232

City-State-Zip: SUNNY ISLES BEACH FL 33160-4748