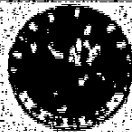


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 19 AM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 102103 (9)

1. Corporation Name

BEVERLY TERRACE MANOR CORPORATION

Principal Place of Business

3224 BISCAYNE BLVD
MIAMI FL 33137

Mailing Address

3224 BISCAYNE BLVD
MIAMI FL 33137

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/07/1925

3a. Date of Last Report

01/27/1994

4. FEI Number

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

9. This corporation has liability for intangible tax under S. 199.032
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

DINES, WILLIAM S.
3224 BISCAYNE BLVD. F-3
MIAMI FL 33137

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 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 DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P

DINES, WILLIAM S
3224 BISCAYNE BLVD
MIAMI FL 33137

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V

DINUNZIO, PHILLIS
3224 BISCAYNE BLVD APT F-1
MIAMI FL 33137

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S

DECONNA, CLAIRE
3224 BISCAYNE BLVD
MIAMI FL 33137

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T

CORRADO, JOHN
3224 BISCAYNE BLVD
MIAMI FL 33137

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D

MOZO, PEARLE
3224 BISCAYNE BLVD APT 1B
MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D

CZAJKA, MATTHEW
3224 BISCAYNE BLVD
MIAMI FL 33137

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

Emily Hofstetter
3224-Biscayne BLVD.
Miami, FLA. 33137

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 110.07(3)(k), Florida Statutes, 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 607, Florida Statutes, and my name appears in Block 12 or Block 13 is changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Daytime Phone #

03-12-95 545-4221