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ARTICLES OF INCORPORATION

of

THE SEACOMBER HOTEL CORP.

March 9, 1948

FILED IN OFFICE SECRETARY
OF STATE OF THE STATE OF
FLORIDA THIS 10 DAY OF
March A.D. 1948
R. A. GRAY,
SECRETARY OF STATE
J. B.

MEYER, WEISS & ROSEN
ATTORNEYS AT LAW
MIAMI BEACH, FLORIDA

RECEIVED

March

MAR 10 1948 m

Mr. R.A.Gray,
Secretary of State,
Tallahassee, Florida.

Dear Sir:

Enclosed herewith are Articles of Incorporation of The Seacomber Hotel Corp., together with our check for $15.00 as initial fee in the matter.

Will you be good enough to direct that the notification of the filing of these Articles be sent to this office.

Very truly yours,

MEYER, WEISS & ROSEN

MMG/m

MT/g 1/2 3/9/48

ARTICLES OF INCORPORATION

of

THE SEACOMBER HOTEL CORP.

We, the undersigned, hereby associate ourselves together for the purpose of becoming a Corporation for profit under the laws of the State of Florida and do hereby certify that we have become such Corporation under and pursuant to the following Articles of Incorporation:

I.

The name of the Corporation is:

THE SEACOMBER HOTEL CORP.

II.

The general nature of the business to be transacted by said Corporation shall be and is as follows:

(a) To carry on in all its various phases the business of hotels, apartment houses, inns and restaurants; to manage and conduct hotels, apartment houses, inns, restaurants, cafes; to buy, sell and to lease and hire the same; to build and construct same and other buildings and generally to do and perform everything necessary for the aforesaid purposes.

(b) To take, lease, purchase or otherwise acquire and to own, use, hold, sell, convey, exchange, lease, mortgage, work improve, develop, cultivate and otherwise handle, deal in and dispose of real estate, real property and any interest or right therein.

To take, purchase or otherwise acquire and to own, hold, sell, convey, exchange, hire, lease, mortgage and otherwise deal in and dispose of all kinds of personal property, chattels, chattels real, choses in action, notes, bonds, mortgages and securities.

To convert and appropriate any land that may be acquired or be lawfully controlled by this Corporation, into and for ways, roads, paths, streets, alleys, sidewalks, parks, gardens, boulevards and pleasure grounds; and generally to deal with, manage, improve and administer the lands owned and controlled by the Corporation or entrusted to its care.

To erect or to have erected, to construct or to have constructed houses, works, buildings, storerooms, factories, tenements, edifices, and structures of every description; and to rebuild, enlarge improve and alter existing houses, works, buildings, storerooms, tenements, edifices and structures of every description; and to buy, sell, own, use, manage and lease the same or similar structures.

To warrant the title to lands or to any estate or interests in lands sold by said Corporation; to issue notes, bonds and debentures secured by mortgage or deeds of trust upon the property of said Corporation or otherwise, and to sell and dispose of the same for the benefit of the Corporation or for any lawful purpose.

To make, enter into, perform and carry out, contracts for construction, building, altering, improving, repairing, decorating, maintaining, furnishing and fitting up buildings, tenements and structures of every description; and to advance money to and enter into greements of all kinds, with builders, contractors, property owners and others, for said purposes.

To collect rents, and to make repairs and to transact, on commission or otherwise, the general business of a real estate agent, and generally, the sale, leasing, control and management of lands, buildings and property of all kinds.

(c) To act as agents, factors, brokers, commission merchants, carriers, contractors, builders, architects, decorators, surveyors, engineers, appraisers, lessees, managers of estate, or otherwise in entering into, undertaking, performing and carrying out and conducting any and all things set forth in this certificate as objects, purposes or powers that it may do for itself; and to exercise its powers to the same extent that natural persons might do and in any part of the world as to the full extent permitted to Corporations organized under the Business Corporation Law of Florida.

(d) To purchase or otherwise acquire and to own, develop, sell, mortgage or otherwise dispose of real estate, real property, and all interests and right therein, without limit or amount and to the same extent as natural persons might or could do and in any part of the world.

(e) To contract freely with any person, firm or corporation, private or public, and carry out and fulfill contracts of every sort and kind and to purchase, lease or otherwise acquire any and all rights, privileges and franchises convenient or profitable to carry out in connection with the corporate purposes and corporate business of the Company.

(f) To borrow money from any person, firm or corporation, to make, issue notes, bills, bonds, indentures, mortgages and other evidences of indebtednesses of all kinds and to secure the same by pledge, mortgage or otherwise, without limit as to amount and to provide for payment of the same by deposited cash, sinking fund or otherwise.

(g) The objects and powers specified in these Articles of Incorporation shall, except where expressly limited, be in no wise restrained by inference from the terms of any other clause in any part of this Charter, but the objects and powers specified in each of the Clauses of this Charter shall be regarded as independent and separate purposes and powers of the Corporation.

III.

The maximum number of shares of stock that this Corporation is authorized to have issued and outstanding at any time is Fifty (50) shares of Common Stock of no par value.

IV.

The amount of the capital with which this Corporation shall and hereby begins business shall be and is in the sum of Five Hundred Dollars ($500.00).

V.

This Corporation shall have perpetual existence unless sooner dissolved according to law.

VI.

The principal office of this Corporation shall be and is located at Miami Beach, Dade County, Florida, with the privilege of having branch offices at any other place or places.

VII.

The number of Directors of this Corporation shall not be less than three (3) nor more than five (5).

VIII.

The name and post office address of each of the Directors of the First Board of Directors, who, subject to the provisions of these Articles of Incorporation, the By-Laws of this Corporation and the laws of the State of Florida, shall hold office for the first year of the Corporation's existence, or until their successors are elected and have qualified, are as follows:

| Name | Address |
|---|---|
| Milton Weiss | 420 Lincoln Road, Miami Beach, Florida |
| Estelle J. Kronick | 420 Lincoln Road, Miami Beach, Florida |
| Grace Portman | 420 Lincoln Road, Miami Beach, Florida |

IX.

The name and post office address of each of the subscribers to these Articles of Incorporation and a statement of the number of shares of stock which eachagree to take are as follows:

| Name | Address | No. of Shares |
|---|---|---|
| Milton Weiss | 420 Lincoln Road, Miami Beach, Florida | 17 |
| Estelle J. Kronick | 420 Lincoln Road, Miami Beach, Florida | 17 |
| Grace Portman | 420 Lincoln Road, Miami Beach, Florida | 16 |

X.

The officers of this corporation shall be a President, Vice-President, Secretary and Treasurer, and such other officers, agents and factors as may be deemed necessary. All officers, agents and factors shall be chosen in such manner, hold their offices for such terms and have such powers and duties as may be prescribed by the By-Laws or determined by the Board of Directors. Any person may hold two or more offices, except that the President shall not also be the Secretary, nor the Assistant Secretary of the Corporation.

The Corporation reserves the right to amend, alter, change or repeal any provision contained in this Certificate of Incorporation in the manner now or hereafter prescribed by law, and all rights conferred on Stockholders herein are granted subject to that reservation.

IN WITNESS WHEREOF, we, the undersigned subscribing Incorporators hereunto set our respective hands and seals on this 9th day of March,



LAW OFFICES

A.D., 1948, for the purpose of forming this Corporation under the laws of the State of Florida, and we hereby make and file, in the Office of the Secretary of the State of Florida, these Articles of Incorporation, and do hereby certify that the facts and matters hereabove set forth are true.

MILTON WEISS

Estelle J. Kronick

Estelle J. Kronick

Grace Portman

STATE OF FLORIDA )
)
COUNTY OF DADE ) ss:

BEFORE ME, the undersigned authority, personally appeared MILTON WEISS, ESTELLE J. KRONICK and GRACE PORTMAN, to me well known, and known to me to be the individuals described in and who executed the above and foregoing Articles of Incorporation, and they each acknowledged before me that they executed the same for the purposes therein expressed.

WITNESS my hand and official seal this 9th day of March, A.D., 1948, at Miami Beach, Dade County, Florida.

Marion M Goldhard
Notary Public State of Florida
at Large

My Commission Expires:
Notary Public, State of Florida at Large.
My Commission Expires May 4, 1950.

No. A-54287 - a

NAME

SEACOMBER HOTEL COR. THE

FILED IN THE OFFICE OF
SECRETARY OF STATE
OF FLORIDA

2-8-49

R. A. GRAY
SECRETARY OF STATE

BY wf

FOLD HERE

STATE OF FLORIDA
OFFICE
SECRETARY OF STATE

RECEIVED
1949 FEB -8 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Certificate Designating Place of Business or Domicile for the Service of Process Within this State, Naming Agent Upon Whom Process May be Served and Names and Addresses of Officers and Directors**

In pursuance of Chapter 11829, Laws of Florida, 1927 Session, the following is submitted, in compliance with said Act:

First — That THE SEACOMBER HOTEL CORP.

a corporation duly organized and existing under the laws of the State of Florida

with its principal place of business at City of Miami Beach

County of Dade State of Florida

has designated and established 420 Lincoln Road (Street or Building)

City of Miami Beach, County of Dade

State of Florida, as its place of business or domicile for the service of process within this State, and named as its agents Meyer, Weiss & Rosen, to accept service of process.

OFFICERS:

| NAME | SPECIFIC ADDRESS |
|---|---|
| Irving Kossoff, President | 1210 Washington Avenue, Miami Beach, Fla. |
| Benjamin Levine, Secretary | Surfcomber Hotel, Miami Beach, Florida |
| Jack Lieberbaum, Vice-President | Surfcomber Hotel, Miami Beach, Florida |
| Benjamin Chaves, Treasurer | 1575 Washington Avenue, Miami Beach, Fla. |

DIRECTORS:

| NAME | SPECIFIC ADDRESS |
|---|---|
| Same as above | |

THE SEACOMBER HOTEL CORP.

By Benjamin Levine
Secretary

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

MEYER, WEISS & ROSEN

By [signature]

It is necessary to file this certificate within thirty days after filing Certificate of Incorporation, as to domestic Corporations, and within thirty days after issuance of permit to foreign corporations; and thereafter only when corporation has changed its place of business or agent.

Filing Fee, $1.00.

No. A-54-287-B

Tax for Years

ptip 1948-1949

FROM
R. A. GRAY
SECRETARY OF STATE
TALLAHASSEE, FLA.

SEC. 562 P. L. & R.
PERMIT NO. 1
TALLAHASSEE, FLA.

**CORPORATION REPORT AND TAX RETURN OF**

Seacomber Hotel Corp. (The)

P. O. ADDRESS

Filed in the office of the Secretary of State of the State of Florida, this ~~JUN 30 1949~~ day of SEP 17 1949 A. D. 19

Secretary of State.

(DO NOT DETACH)

## CHAPTER 14677—ACTS OF 1931—REQUIRING THE FILING OF THIS REPORT— (AS AMENDED)

AN ACT Requiring Corporations Authorized to do Business in the State of Florida, Both Foreign and Domestic, Annually to File with the Secretary of State Certain Reports and/or Pay a Certain Tax in the Nature of Filing Fee Thereon.

Section 1. All corporations, except such as are specifically exempted in Section 6 of this Act including those corporations heretofore incorporated under the laws of the State of Florida and those that may hereafter be incorporated under the laws of the State of Florida and all foreign corporations which heretofore have been or may hereafter be authorized to do business in the State of Florida, be and the same are hereby required to file with the Secretary of State on July 1st of each year a sworn report on such form as the Secretary of State shall prescribe, giving the names of the officers and directors and the Post Office address of each, the home office of the corporation, the name and address of the resident agent upon whom service of process may be made, the main line of business engaged in by the corporation, the date of the last meeting of its Board of Directors whether the corporation has been actively engaged in business during the previous twelve months or if its charter powers have been dormant and unused during that period, the number of the shares of the capital stock of such corporation with the par value thereof, the total amount of capital stock and if a foreign corporation the amount of its capital stock allocated for use in the State of Florida, and such other information as may be needed to show if the corporation is active or inactive, and such other information as may be necessary for the Secretary of State to have in carrying out the provisions of this Act.

Section 2. Every corporation required to file reports as provided in Section 1 of this Act shall pay to the Secretary of State for the use of the State of Florida a filing fee or tax according to the schedule set forth in this section which, however, shall in no instance be less than $10.00 nor greater than $1,000.00.

### Schedule for Filing Fees

| | |
|---|---|
| For all corporations with capital stock not exceeding $10,000.00 | $ 10.00 |
| For Capital Stock of over $10,000.00 and not over $25,000.00 | 25.00 |
| For Capital Stock of over $25,000.00 and not over $50,000.00 | 50.00 |
| For Capital Stock of over $50,000.00 and not over $100,000.00 | 75.00 |
| For Capital Stock of over $100,000.00 and not over $200,00.00 | 100.00 |
| For Capital Stock of over $200,000.00 and not over $500,000.00 | 200.00 |
| For Capital Stock of over $500,000.00 and not over $1,000,000.00 | 500.00 |
| For Capital Stock of over $1,000,000.00 and not over $2,000,000.00 | 750.00 |
| For Capital Stock over $2,000,000.00 | 1,000.00 |

The Capital Stock above mentioned refers to the invested Capital represented by shares of stock outstanding.

Section 3. The Secretary of State shall prescribe the form and furnish the blanks upon request to make the annual reports called for in this law. The Secretary of State shall examine the reports when received and if the information called for is given in such reports he shall file the same as information and keep such reports as public records. He shall pay into the state treasury to be used for such purposes as the Legislature may determine all moneys collected under the provisions of this law. Such amounts for printing form, postage, files, clerical and other expenses found to be actually necessary in carrying out the provisions of this law are appropriated from such funds not to exceed fifteen thousand dollars annually.

Section 4. The Secretary of State shall cause a notice of the requirements of this Act to be mailed to the last known address of every corporation doing business in the State of Florida which shall fail to file within thirty days after July first, the report called for herein and/or pay the filing fee or tax herein imposed. Every corporation which shall fail to comply with the provisions of this Act within three months after July 1st of each year shall be deemed to be no longer exercising its charter or corporate privilege in this State.

Section 5. Any corporation failing to comply with the provisions of this Act for six months shall forfeit its corporate and charter privileges and shall not be permitted to maintain any action in any court in this State until such reports are filed and all fees due thereunder paid. On January first of each year the Secretary of State shall make up a list of the corporations of record in his office which have failed to comply with the provisions of this Act and shall mail a copy of such lists to the Clerk of the Circuit Courts, and Civil Courts of Record, the Circuit Judges and the Justices of the Peace of this State.

Section 6. The following shall be exempt from the provisions of this Act: railroad companies, Pullman companies, telephone and telegraph companies, bank and trust companies, building and loan associations, insurance companies, co-operative marketing associations and corporations not for profit; these corporations and companies so exempt from the operation of this Act being regulated by paying excise taxes under other provisions of law.

Section 7. Nothing in this Act shall be construed as to apply to a corporation that has been adjudged bankrupt or dissolved by order of the court, however, such corporations shall file a statement with the Secretary of State setting forth their status in this respect but shall not be required to pay a tax.

Section 8. The Secretary of State shall mail statement as required in Section 4 to corporations of record subject to the provisions of this Act, giving notice of the time in which reports must be filed, provided, however, in case of any Florida corporations having been organized less than twelve months prior to July 1st of any year in which reports are due to be filed and the tax due to be paid and in case of any foreign corporation which has been authorized to do business in Florida for less than twelve months at the time the report is due to be made and the tax is due to be paid, then in that event, the tax due for that year shall be pro-rated according to the number of months the corporation has been in existence or authorized to do business in this State.

Section 9. All statements required to be filed under this law shall be for the calendar year and shall be due to be filed on July first of such year and the tax payable thereon shall be due to be paid at that time.

Section 10. Any clause or section of this Act which for any reason, may be held or declared invalid may be eliminated and the remaining portions thereof shall be and remain in full force and be valid in the same manner and to the same extent as if such invalid clause or section had not been incorporated therein.

Section 11. Any corporation paying the maximum fee herein provided for shall not be required to file any reports whatsoever as required by the provisions of this Act.

Section 12. In the event the shares of stock of any such corporations should be no par value, then for the purpose of this Act, each share shall be deemed or presumed to have value of at least $100.00 per share, which presumption may be overcome by actual proof submitted to the Secretary of State. For the purpose of this Act the Secretary of State is hereby authorized to make such investigation as he may consider necessary and to increase or decrease the value of no-par value stock as he may determine to be correct from the proof submitted.

Approved May 28, 1931.

Pool—Cabana Club

EXECUTIVE OFFICE
TELEPHONE 58-5321

# Hotel Seacomber

On the Ocean between 17th and 18th St.
MIAMI BEACH, FLORIDA

Sept. 14th 1949

Hon. R.A. Gray
Secretary Of State
State Of Florida
Tallahassee, Fla.

Dear Sir:

We received your letter of August 26,1949 and the returned tax report. We wish to advise that the corporation remained inactive until Dec. 1, 1948 and is now in its first year of operation. It has not been definitely decided just what date the corporation will close its fiscal year and therefore as of June 30, 1948 and 1949 there was no surplus and only 50 shares of No Par Stockvalued for the purpose of taxation at $100.00 per share. In accordance with your letter mentioned above the tax due is $13.05, check for which is herewith enclosed.

Very truly yours,

Seacomber Hotel Corp.

By Irving Kosaff

Irving Kosaff, Pres.

SEP 17 1949

(DO NOT DETACH)

Form D. C. T. R.—For Domestic Corporations

Date Rec. [illegible]

Amt. Rec. ~~20.00~~ 13.05

# Corporation Report And Tax Returns

to the

# Secretary of State of Florida

As required by Senate Bill 724, Chap. 16477 (as amended) Laws of Florida, 1933

HON. R. A. GRAY, Secretary of State,
Tallahassee, Florida.

SIR:—

In compliance with the law above referred to we submit below information called for and enclose remittance for $ ~~20.00~~ 13.05 to pay the tax imposed by said law.

(1) That THE SEACOMBER HOTEL CORP.

(Give correct name of corporation)

Principal place of business 1725 Collins Avenue-Miami Beach, Florida

Insert to whom receipt is to be mailed C/O Surfcomber Hotel 1717 Collins Avenue-Miami Beach, Florida

a corporation duly organized and existing under the laws of the State of Florida, with its principal place of business within the State at Miami Beach County of Dade has designated and established 1717 Collins Avenue (Street or Building) City of Miami Beach County of Dade State of Florida, as its place of business or domicile for the service of process within the State, and has named and does hereby name as its agent I. Kossoff, President

(2) NAMES AND ADDRESSES OF OFFICERS: BE SURE AND AFFIX TITLES:

| Name | Address |
|---|---|
| I. Kossoff, President | Miami Beach, Florida |
| J. Leiberbaum-V-President | Miami Beach, Florida |
| B. Levine, Secretary | Miami Beach, Florida |
| B. Chaves, Treasurer | Miami Beach, Florida |

(3) NAMES AND ADDRESSES OF DIRECTORS:

| Name | Address |
|---|---|
| same as above | |

(4) General nature of main business engaged in

(5) Date incorporated 3-10-48

(See copy of law printed herein).

Date of last meeting of Board of Directors

Is Corporation active? yes If inactive, state how long

Is the purpose of the Corporation to begin operations in the future?

## CAPITAL STOCK STATEMENT

(6) The total authorized capital stock as follows:

shares of the par value of each

50 shares without nominal or par value

OUTSTANDING CAPITAL STOCK AS FOLLOWS:

shares of the par value of each $

50 shares without nominal or par value, fixed by

law for purpose of taxation at $100.00 par shares $ 5,000.00

(See Section 12) Total outstanding capital stock $ 5,000.00

Tax as per schedule $ 10.00

Note:—In the case of no par value shares, a financial statement should be submitted to show the actual value, and this will be the basis of the taxation.

Only one report necessary where more than one year's tax is paid at the time of filing.

(7) We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

(SEAL) Irving Kossoff President or Vice-President

ATTEST:

Benjamin Levine

Secretary

STATE OF FLORIDA,

COUNTY OF

Personally appeared before me Irving Kossoff and Benjamin Levine

who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 29 day of June, 1949

(SEAL)

Notary Public, State of Florida at Large.
My Commission Expires May 4, 1951

(Signature of officer taking acknowledgement)

JUN 30 1949

FROM
R. A. GRAY
SECRETARY OF STATE
TALLAHASSEE, FLA.

SEC. 34.66—P. L. & R.
PERMIT NO. 6
TALLAHASSEE, FLA.

No. A-54-287-C

Tax for Years

1950

CORPORATION REPORT AND
TAX RETURN OF

The Seacomber
Hotel Corp.

P. O. ADDRESS

Filed in the office of the Secretary of State of the State of Florida, this ...... day of AUG 17 1950

A. D. 19......

Secretary of State.

(DO NOT DETACH)

# CHAPTER 14677—ACTS OF 1931—REQUIRING THE FILING OF THIS REPORT— (AS AMENDED)

AN ACT Requiring Corporations Authorized to do Business in the State of Florida, Both Foreign and Domestic, Annually to File with the Secretary of State Certain Reports and to Pay a Certain Tax in the Nature of Filing Fee Thereon.

Section 1. All corporations, except such as are specifically exempted in Section 6 of this Act including those corporations heretofore incorporated under the laws of the State of Florida and those that may hereafter be incorporated under the laws of the State of Florida and all foreign corporations which heretofore have been or may hereafter be authorized to do business in the State of Florida, be and the same are hereby required to file with the Secretary of State on July 1st of each year a sworn report on such form as the Secretary of State shall prescribe, giving the names of the officers and directors and the Post Office address of each, the home office of the corporation, the name and address of the resident agent upon whom service of process may be made, the main line of business engaged in by the corporation, the date of the last meeting of its Board of Directors whether the corporation has been actively engaged in business during the previous twelve months or if its charter powers have been dormant and unused during that period, the number of the shares of the capital stock of such corporation with the par value thereof, the total amount of capital stock and if a foreign corporation the amount of its capital stock allocated for use in the State of Florida, and such other information as may be needed to show if the corporation is active or inactive, and such other information as may be necessary for the Secretary of State to have in carrying out the provisions of this Act.

Section 2. Every corporation required to file reports as provided in Section 1 of this Act shall pay to the Secretary of State for the use of the State of Florida a filing fee or tax according to the schedule set forth in this section which, however, shall in no instance be less than $10.00 nor greater than $1,000.00.

### Schedule for Filing Fees

| | |
|---|---|
| For all corporations with capital stock not exceeding $10,000.00 | $ 10.00 |
| For Capital Stock of over $10,000.00 and not over $25,000.00 | 25.00 |
| For Capital Stock of over $25,000.00 and not over $50,000.00 | 50.00 |
| For Capital Stock of over $50,000.00 and not over $100,000.00 | 75.00 |
| For Capital Stock of over $100,000.00 and not over $200,000.00 | 100.00 |
| For Capital Stock of over $200,000.00 and not over $500,000.00 | 200.00 |
| For Capital Stock of over $500,000.00 and not over $1,000,000.00 | 500.00 |
| For Capital Stock of over $1,000,000.00 and not over $2,000,000.00 | 750.00 |
| For Capital Stock over $2,000,000.00 | 1,000.00 |

The Capital Stock above mentioned refers to the invested Capital represented by shares of stock outstanding.

Section 3. The Secretary of State shall prescribe the form and furnish the blanks upon request to make the annual reports called for in this law. The Secretary of State shall examine the reports when received and if the information called for is given in such reports he shall file the same as information and keep such reports as public records. He shall pay into the state treasury to be used for such purposes as the Legislature may determine all moneys collected under the provisions of this law. Such amounts for printing forms, postage, files, clerical and other expenses found to be actually necessary in carrying out the provisions of this law are appropriated from such funds not to exceed fifteen thousand dollars annually.

Section 4. The Secretary of State shall cause a notice of the requirements of this Act to be mailed to the last known address of every corporation doing business in the State of Florida which shall fail to file within thirty days after July first, the report called for herein and/or pay the filing fee or tax herein imposed. Every corporation which shall fail to comply with the provisions of this Act within three months after July 1st of each year shall be deemed to be no longer exercising its charter or corporate privilege in this State.

Section 5. Penalty for Failure to File Report. Any corporation failing to comply with the provisions of this law for six months shall not be permitted to maintain any action in any court of this state until such reports are filed and all fees due under this chapter paid.

Section 6. The following shall be exempt from the provisions of this Act: railroad companies, Pullman companies, telephone and telegraph companies, bank and trust companies, building and loan associations, insurance companies, co-operative marketing associations and corporations not for profit; these corporations and companies so exempt from the operation of this Act being regulated by paying excise taxes under other provisions of law.

Section 7. Nothing in this Act shall be construed as to apply to a corporation that has been adjudged bankrupt or dissolved by order of the court, however, such corporations shall file a statement with the Secretary of State setting forth their status in this respect but shall not be required to pay a tax.

Section 8. The Secretary of State shall mail statement as required in Section 4 to corporations of record subject to the provisions of this Act, giving notice of the time in which reports must be filed; provided, however, in case of any Florida corporations having been organized less than twelve months prior to July 1st of any year in which reports are due to be filed and the tax due to be paid and in case of any foreign corporation which has been authorized to do business in Florida for less than twelve months at the time the report is due to be made and the tax is due to be paid, then in that event, the tax due for that year shall be pro-rated according to the number of months the corporation has been in existence or authorized to do business in this State.

Section 9. All statements required to be filed under this law shall be for the calendar year and shall be due to be filed on July first of such year and the tax payable thereon shall be due to be paid at that time.

Section 10. Any clause or section of this Act which, for any reason, may be held or declared invalid may be eliminated and the remaining portions thereof shall be and remain in full force and be valid in the same manner and to the same extent as if such invalid clause or section had not been incorporated therein.

Section 11. Any corporation paying the maximum fee herein provided for shall not be required to file any reports whatsoever as required by the provisions of this Act.

Section 12. No par value stock; valuation. In the event the shares of stock of any such corporation shall be no par value, then for the purposes of this law, each share shall be deemed or presumed to have value of at least one hundred dollars per share, which presumption may be overcome by actual proof submitted to the Secretary of State. For the purposes of this law the Secretary of State shall make such investigation as he may consider necessary and increase or decrease the value of no par value stock as he may determine to be correct from the proof submitted; and in so doing the Secretary of State may take into consideration all facts with reference to the fair market value of the stock included, the price for which the stock was sold and the surplus as part of the capital structure.

Approved May 28, 1931.

(DO NOT DETACH)

Form D. C. T. R.—For Domestic Corporations

AUG 17 1950

Date Rec.

Amt. Rec. 25.00

Amt. of Tax

# Corporation Report and Tax Returns

to the

# Secretary of State of Florida

As required by Senate Bill 734, Chap. 14677 (as amended) Laws of Florida, 1931

HON. R. A. GRAY, Secretary of State,
Tallahassee, Florida.

SIR:

In compliance with the law above referred to we submit below information called for and enclose remittance for $ 25.00 to pay the tax imposed by said law.

(1) That Seacomber Hotel Corp.
(Give correct name of corporation)

Principal place of business c/o Surfcomber Hotel, 1717 Collins Ave., Miami Beach, Fla.

Insert to whom receipt is to be mailed Same

a corporation duly organized and existing under the laws of the State of Florida, with its principal place of business within the State at Miami Beach County of Dade, has designated and established 1717 Collins Ave. (Street or Building) City of Miami Beach, County of Dade, State of Florida, as its place of business or domicile for the service of process within the State, and has named and does hereby name as its agent Benj. Levine

(2) NAMES AND ADDRESSES OF OFFICERS: BE SURE AND AFFIX TITLES:

| Name | | Address |
|---|---|---|
| J. Mermelli | Pres. | Chicago, Illinois |
| J. Lieberbaum | V. P. - Treas. | Miami Beach, Fla. |
| Benj. Levine | Sec'y | Miami Beach, Fla. |

(3) NAMES AND ADDRESSES OF DIRECTORS:

| Name | | Address |
|---|---|---|
| J. Mermelli | Pres. | Chicago, Illinois |
| J. Lieberbaum | V. P. - Treas. | Miami Beach, Fla. |
| Benj. Levine | Sec'y | Miami Beach, Fla. |

(4) General nature of main business engaged in Hotel Lessors

(5) Date Incorporated 3/10/48

(See copy of law printed herein).

Date of last meeting of Board of Directors 1950

Is Corporation active? Yes If inactive, state how long

Is the purpose of the Corporation to begin operations in the future? No

## CAPITAL STOCK STATEMENT

(6) The total authorized capital stock as follows:

_______ shares of the par value of _______ each

50 shares without nominal or par value

OUTSTANDING CAPITAL STOCK AS FOLLOWS:

_______ shares of the par value of _______ each $_______

50 shares without nominal or par value, actual value being $ 5,000.00

(Evidence of actual value may be shown by a condensed balance sheet)

Total outstanding capital stock . . . . . . . . . . $ 24,117.96

Tax as per schedule . . . . . . . . . . . . $ 25.00

Only one report necessary where more than one year's tax is paid at the time of filing.

(7) We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

(SEAL) Jack Lieberman

By ~~President or~~ Vice-President

ATTEST:

Benjamin Levine.

Secretary

STATE OF FLORIDA,

COUNTY OF Dade

Personally appeared before me Benjamin Levine

Secy

who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 15th day of

Aug, 1952

(SEAL)

Notary Public, State of Florida at large
My commission expires July 1, 1953.
Bonded by American Surety Co. of N. Y.

Murray L Halpern

(Signature of officer taking acknowledgment)

BALANCE SHEET
NOVEMBER 30, 1949 (End of Fiscal Year)

| | |
|---|---|
| ASSETS | $552,657.65 |
| LIABILITIES | $528,539.69 |
| CAPITAL AND SURPLUS | 24,117.96 |
| TOTAL | $552,657.65 |

No. J-54287-D

Tax for Years

1951

**CORPORATION REPORT AND TAX RETURN OF**

The Seacomber Hotel Corp.

P. O. ADDRESS

Filed in the office of the Secretary of State of the State of Florida, this OCT 25 1951 day of

A. D. 19........

Secretary of State.

ROBINSONS INC. TALLAHASSEE

FROM
R. A. GRAY
SECRETARY OF STATE
TALLAHASSEE, FLA.

SEC. 34.66—P. L. & R.
PERMIT NO. 6
TALLAHASSEE, FLA.

THE SEACOMBER HOTEL CORP.
% Surfcomber Hotel
1717 Collins Ave.
Miami Beach, Florida

(DO NOT DETACH)

# ANNUAL CORPORATION CAPITAL STOCK TAX LAW

610.07. Annual report of corporation; contents. — All corporations, including those heretofore incorporated under the laws of this state and those that may hereafter be incorporated and all foreign corporations which have heretofore been or may hereafter be authorized to do business in this state, except railroad companies, pullman companies, telephone and telegraph companies, banking and trust companies, building and loan [illegible] ciations and corporations not for profit, are required to file with the Secretary of State on July 1st of each year a sworn report on such form as the Secretary of State shall prescribe, giving the names of the officers and directors and the post office address of each, the home office of the corporation, the name and address of the resident agent upon whom service of process may be made, the main line of business engaged in by the corporation, the date of the last meeting of its board of directors, whether the corporation has been actively engaged in business during the previous twelve months or if its charter powers have been dormant and unused during that period, the number of the shares of the capital stock of such corporations with the par value thereof, the total amount of capital stock and if a foreign corporation the amount of its capital stock allocated for use in the State of Florida, and such other information as may be needed to show if the corporation is active or inactive, and such other information as may be necessary for the Secretary of State to have in carrying out the provisions of this law.

610.08. Schedule of filing fees. — Every corporation required to file reports as aforesaid shall pay to the Secretary of State for the use of the State of Florida, a filing fee or tax according to the schedule set forth in this section, which, however, shall in no instance be less than ten dollars nor greater than one thousand dollars.

SCHEDULE FOR FILING FEES

| | |
|---|---|
| For all corporations with capital stock not exceeding $10,000.00 | $ 10.00 |
| For capital stock of over $10,000.00 and not over $25,000.00 | 25.00 |
| For capital stock of over $25,000.00 and not over $50,000.00 | 50.00 |
| For capital stock of over $50,000.00 and not over $100,000.00 | 75.00 |
| For capital stock of over $100,000.00 and not over $200,000.00 | 100.00 |
| For capital stock of over $200,000.00 and not over $500,000.00 | 200.00 |
| For capital stock of over $500,000.00 and not over $1,000,000.00 | 500.00 |
| For capital stock of over $1,000,000.00 and not over $2,000,000.00 | 750.00 |
| For capital stock of over $2,000,000.00 | 1,000.00 |

The capital stock above mentioned refers to the invested capital represented by shares of stock outstanding.

610.09. Duties of Secretary of State. — The Secretary of State shall prescribe the form and furnish the blanks upon request to make the annual reports called for in this law. The Secretary of State shall examine the reports when received and if the information called for is given in such reports he shall file the same as information and keep such reports as public records. He shall pay into the State Treasury to be used for such purposes as the legislature may determine all moneys collected under the provisions of this law. Such amounts for printing forms, postage, files, clerical and other expenses found to be actually necessary in carrying out the provisions of this law are appropriated from such funds, not to exceed Fifteen Thousand Dollars annually.

610.10. Mailing of notices to corporation. — The Secretary of State shall cause a notice of the requirement of this law to be mailed to the last known address of every corporation doing business in the State of Florida which shall fail to file within thirty days after July first, the report called for in this chapter or pay the filing fee of tax imposed. Every corporation which shall fail to comply with the provisions of this law within three months after July 1st of each year shall be deemed to be no longer exercising its charter or corporate privilege in this state; provided, however, in case of any Florida corporations having been organized less than twelve months prior to July 1st of any year in which the reports are due to be filed and the tax due to be paid and in case of any foreign corporation which has been authorized to do business in Florida for less than twelve months at the time the report is due to be made and the tax is due to be paid, then in that event, the tax due for that year shall be pro rated according to the number of months the corporation has been in existence or authorized to do business in this state.

610.11. Penalty for failure to file report. — Any corporation failing to comply with the provisions of this law for six months shall not be permitted to maintain or defend any action in any court of this state until such reports are filed and all fees due under this chapter paid.

610.12. Bankrupt and dissolved corporations. — Nothing in this law shall be construed as to apply to a corporation that has been adjudged bankrupt or dissolved by order of the court; however, such corporations shall file a statement with the Secretary of State setting forth their status in this respect but shall not be required to pay a tax.

610.13. Period to be covered by statement. — All statements required to be filed under this law shall be for the calendar year and shall be due to be filed on July first of each year and the tax payable thereon shall be due to be paid at that time.

610.14. Corporations paying maximum fee. — Any corporation paying the maximum fee provided for in this chapter shall not be required to file any reports whatsoever as required by the provisions of this law.

610.15. No par value stock; valuation. — In the event the shares of stock of any such corporation shall be no par value, then for the purposes of this law, each share shall be deemed or presumed to have a value of at least one hundred dollars per share, which presumption may be overcome by actual proof submitted to the Secretary of State. For the purposes of this law the Secretary of State shall make such investigation as he may consider necessary and increase or decrease the value of no par value stock as he may determine to be correct, and in so doing the Secretary of State may take into consideration all facts tending to show the fair market value of the stock including the sale price of the stock, the amount of the surplus of the corporation and such other pertinent facts as he may deem advisable.

(DO NOT DETACH)

Form D.C.T.R.—For Domestic Corporations

# Corporation Report and Tax Returns

to the

# Secretary of State of Florida

As required by Senate Bill 734, Chap. 14677 (as amended) Laws of Florida, 1931

| | |
|---|---|
| Date Rec. | OCT 25 1951 |
| Amt. Rec. | 50.00 |
| Amt. of Tax | |

HON. R. A. GRAY, Secretary of State,
Tallahassee, Florida.

SIR:

In compliance with the law above referred to we submit below information called for and enclose remittance for $ 50.00 to pay the tax imposed by said law.

(1) ~~[illegible]~~ Seacomber Hotel Corp.
(Give correct name of corporation)

Principal place of business Miami Beach, Florida

Insert to whom receipt is to be mailed Taxpayer

a corporation duly organized and existing under the laws of the State of Florida, with its principal place of business within the State at Miami Beach, County of Dade, has designated and established 1717 Collins Avenue (Street or Building) City of Miami Beach, County of Dade, State of Florida, as its place of business or domicile for the service of process within the State, and has named and does hereby name as its agent Jack Lieberbaum

(2) NAMES AND ADDRESSES OF OFFICERS: BE SURE AND AFFIX TITLES:

| Name | Address |
|---|---|
| Jack Lieberbaum ~~[illegible]~~ Secy. | Miami Beach, Fla |
| Edward J. Mirmelli President | Chicago, Ill |
| ~~[illegible]~~ ~~Secretary~~ | ~~New York, New York~~ |

(3) NAMES AND ADDRESSES OF DIRECTORS:

| Name | Address |
|---|---|
| Jack Lieberbaum | Miami Beach, Fla |
| Edward J. Mirmelli | Chicago, Ill |
| ~~[illegible]~~ | |
| Louis Lieberbaum | Brooklyn, N.Y |

(4) General nature of main business engaged in Lessor - Hotel

(5) Date incorporated 3/10/48

(See copy of law printed herein).

Date of last meeting of Board of Directors____________________

Is Corporation active? ____Yes____ If inactive, state how long____________

Is the purpose of the Corporation to begin operations in the future? ____________

## CAPITAL STOCK STATEMENT

(6) The total authorized capital stock as follows:

____________ shares of the par value of ____________ each

____50____ shares without nominal or par value

OUTSTANDING CAPITAL STOCK AS FOLLOWS:

____________ shares of the par value of ____________ each $____________

____50____ shares without nominal or par value, actual $ 41,751.33

(Be sure and show number of shares issued and their actual value. Evidence of actual value may be shown by a condensed sheet.)

11/30/50 - Total Assets $455,414.92

Total Liabilities 413,663.59

Total outstanding capital stock $ 41,751.33

Tax as per schedule $ 50.00

Only one report necessary where more than one year's tax is paid at the time of filing.

(7) We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

(SEAL) Edward J. [illegible]

By President ~~or Vice-President~~

ATTEST:

Jack [illegible]

Secretary

STATE OF FLORIDA,
COUNTY OF Dade

Personally appeared before me Jack [illegible]

who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 22nd day of October, 1957

(SEAL)

[illegible]

(Signature of officer taking acknowledgment)

Notary Public, State of Florida at large
My commission expires July 1, 195[illegible]
Bonded by American Surety Co. of N.Y.

No. A-54-287-E

Tax for Years

1952-1953

CORPORATION REPORT AND TAX RETURN OF

Seaview Hotel Corp
The

P. O. ADDRESS

Filed in the office of the Secretary of State of the State of Florida, this APR 2 1954

day of

A. D. 19

Secretary of State.

FROM R. A. GRAY SECRETARY OF STATE TALLAHASSEE, FLA.

SEC. 34.66—P.L.&R. PERMIT NO. 8 TALLAHASSEE, FLA.

(DO NOT DETACH)

# ANNUAL CORPORATION CAPITAL STOCK TAX LAW

610.07. Annual report of corporation; contents. — All corporations, including those heretofore incorporated under the laws of this state and those that may hereafter be incorporated and all foreign corporations which have heretofore been or may hereafter be authorized to do business in this state, except railroad companies, pullman companies, telephone and telegraph companies, banking and trust companies, building and loan associations, insurance companies, cooperative marketing associations and corporations not for profit, are required to file with the Secretary of State on July 1st of each year a sworn report on such form as the Secretary of State shall prescribe, giving the names of the officers and directors and the post office address of the resident agent upon whom service of process may be made, the main line of business engaged in by the corporation, the date of the last meeting of its board of directors, whether the corporation has been actively engaged in business during the previous twelve months or if its charter powers have been dormant and unused during that period, the number of the shares of the capital stock of such corporations with the par value thereof, the total amount of capital stock and if a foreign corporation the amount of its capital stock allocated for use in the State of Florida, and such other information as may be needed to show if the corporation is active or inactive, and such other information as may be necessary for the Secretary of State to have in carrying out the provisions of this law.

610.08. Schedule of filing fees.—Every corporation required to file reports as aforesaid shall pay to the Secretary of State for the use of the State of Florida, a filing fee or tax according to the schedule set forth in this section, which, however, shall in no instance be less than ten dollars nor greater than one thousand dollars.

SCHEDULE FOR FILING FEES

| | |
|---|---|
| For all corporations with capital stock not exceeding $10,000.00 | $ 10.00 |
| For capital stock of over $10,000.00 and not over $25,000.00 | 25.00 |
| For capital stock of over $25,000.00 and not over $50,000.00 | 50.00 |
| For capital stock of over $50,000.00 and not over $100,000.00 | 75.00 |
| For capital stock of over $100,000.00 and not over $200,000.00 | 100.00 |
| For capital stock of over $200,000.00 and not over $500,000.00 | 200.00 |
| For capital stock of over $500,000.00 and not over $1,000,000.00 | 500.00 |
| For capital stock of over $1,000,000.00 and not over $2,000,000.00 | 750.00 |
| For capital stock of over $2,000,000.00 | 1,000.00 |

The capital stock above mentioned refers to the invested capital represented by shares of stock outstanding.

610.09. Duties of Secretary of State.—The Secretary of State shall prescribe the form and furnish the blanks upon request to make the annual reports called for in this law. The Secretary of State shall examine the reports when received and if the information called for is given in such reports he shall file the same as information and keep such reports as public records. He shall pay into the State Treasury to be used for such purposes as the legislature may determine all moneys collected under the provisions of this law. Such amounts for printing form, postage, files, clerical and other expenses found to be actually necessary in carrying out the provisions of this law are appropriated from such funds not to exceed Fifteen Thousand Dollars annually.

610.10. Mailing of notices to corporation.—The Secretary of State shall cause a notice of the requirement of this law to be mailed to the last known address of every corporation doing business in the State of Florida which shall fail to file within thirty days after July first, the report called for in this chapter or pay the filing fee of tax imposed. Every corporation which shall fail to comply with the provisions of this law within three months after July 1st of each year shall be deemed to be no longer exercising its charter or corporate privilege in this state; provided, however, in case of any Florida corporations having been organized less than twelve months prior to July 1st of any year in which the reports are due to be filed and the tax due to be paid and in case of any foreign corporation which has been authorized to do business in Florida for less than twelve months at the time the report is due to be made and the tax is due to be paid, then in that even, the tax due for that year shall be pro rated according to the number of months the corporation has been in existence or authorized to do business in this state.

610.11. Penalty for failure to file report—Any corporation failing to comply with the provisions of this law for six months shall not be permitted to maintain or defend any action in any court of this state until such reports are filed and all fees due under this chapter paid.

610.12. Bankrupt and dissolved corporations.—Nothing in this law shall be construed as to apply to a corporation that has been adjudged bankrupt or dissolved by order of the court, however, such corporations shall file a statement with the Secretary of State setting forth their status in this respect but shall not be required to pay a tax.

610.13. Period to be covered by statement.—All statements required to be filed under this law shall be for the calendar year and shall be due to be filed on July first of such year and the tax payable thereon shall be due to be paid at that time.

610.14. Corporations paying maximum fee.—Any corporation paying the maximum fee provided for in this chapter shall not be required to file any reports whatsoever as required by the provisions of this law.

610.15. No par value stock; valuation.—In the event the shares of stock of any such corporation shall be no par value, then for the purposes of this law, each share shall be deemed or presumed to have a value of at least one hundred dollars per share, which presumption may be overcome by actual proof submitted to the Secretary of State. For the purposes of this law the Secretary of State shall make such investigation as he may consider necessary and increase or decrease the value of no par value stock as he may determine to be correct; and in so doing the Secretary of State may take into consideration all facts tending to show the fair market value of the stock including the sale price of the stock, the amount of the surplus of the corporation and such other pertinent facts as he may deem advisable.

Section 8. The following shall be exempt from the provisions of this Act: railroad companies, Pullman companies, telephone and telegraph companies, bank and trust companies, building and loan associations, insurance companies, co-operative marketing associations, and corporations not for profit; these corporations and companies so exempt from the operation of this Act being regulated by or paying excise taxes under other provisions of law. (Acts 1931)

(DO NOT DETACH)

Form D.C.T.R.—For Domestic Corporations

# Corporation Report and Tax Returns

to the

## Secretary of State of Florida

As required by Senate Bill 734, Chap. 14677 (as amended) Laws of Florida, 1931

Date Rec. APR 2 1954

Amt. Rec. 150.00

Amt. of Tax

HON. R. A. GRAY, Secretary of State,
Tallahassee, Florida.

1952 & 1953

SIR:

In compliance with the law, above referred to we submit below information called for and enclose remittance for $ 150.00 to pay the tax imposed by said law.

(1) That Seacomber Hotel Corp. Inc.
(Give current name of corporation)

Principal place of business 1725 Collins Ave., Miami Beach, Florida

Insert to whom receipt is to be mailed Same

a corporation duly organized and existing under the laws of the State of Florida, with its principal place of business within the State at Miami Beach, County of Dade, has designated and established 1725 Collins Ave. City of Miami Beach, County of Dade, State of Florida, as its place of business or domicile for the service of process within the State, and has named and does hereby name as its agent Jack Lieberbaum, 1717 Collins Ave., Miami Beach, Fla.

(2) NAMES AND ADDRESSES OF OFFICERS: BE SURE AND AFFIX TITLES:

| Name | | Address |
|---|---|---|
| Edward J. Mirmelli | Pres. | Chicago, Illinois |
| Louis Lieberbaum | Vice-Pres. | Belle Harbor, N. Y. |
| Jack Lieberbaum | Sec. | Miami Beach, Florida |
| Lawrence Mirmelli | Treas. | Chicago, Illinois |

(3) NAMES AND ADDRESSES OF DIRECTORS:

Address Name

Same as (2) Above

Jack Lieberbaum, Secty.
x Edward J. Mirmelli Pres.

My Commission Expires June 29, 1958
Margaret L. Ruiz

(4) General nature of main business engaged in Hotel

(5) Date incorporated March 10, 1948

(See copy of law printed herein).

Date of last meeting of Board of Directors 12/31/52

Is Corporation active? Yes If inactive, state how long

Is the purpose of the Corporation to begin operations in the future?

## CAPITAL STOCK STATEMENT

(6) The total authorized capital stock as follows:

shares of the par value of each

50 shares without nominal or par value

OUTSTANDING CAPITAL STOCK AS FOLLOWS:

shares of the par value of each $

33-1/4 shares without nominal or par value, actual $ 70,700

(Be sure and show number of shares issued and their actual value. Evidence of actual value may be shown by a condensed sheet.)

(Net Worth at 6/30/53)

Total outstanding capital stock $

Tax as per schedule 1953 $ 75.00

1952 75.00

Total $ 150.00

ONLY ONE REPORT NECESSARY WHERE MORE THAN ONE YEAR'S TAX IS PAID AT THE TIME OF FILING.

(7) We, the undersigned, certify the above state of facts to be true and correct as shown by our books.

(SEAL) Edward J. Mizinski

By President or Vice-President

ATTEST:

X

Secretary

STATE OF FLORIDA,

COUNTY OF

Personally appeared before me

who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this day of

, 19

(SEAL)

(Signature of officer taking acknowledgement)

FROM
R. A. GRAY
SECRETARY OF STATE
TALLAHASSEE, FLA.

No. A-54-287-F

Tax for Years

1951

CORPORATION REPORT AND TAX RETURN OF

The Seacomber Hotel Corp.

P. O. ADDRESS

(Do not write below this line)

Filed in the office of the Secretary of State of the State of Florida, this SEP 8 1954

day of

A. D. 19

Secretary of State.

SEC. 34.66—P.L.&R.
PERMIT NO. 6
TALLAHASSEE, FLA.

(DO NOT DETACH)

# ANNUAL CORPORATION CAPITAL STOCK TAX LAW

**608.32 Annual report of corporation; contents.—**

(1) All corporations heretofore or hereafter incorporated in this state and all foreign corporations heretofore or hereafter authorized to do business in this state are required to file with the secretary of state on or before July 1st of each year a sworn report, on such form as the secretary of state shall prescribe, giving (a) the name of each officer and director and his post office address, (b) the home office of the corporation, (c) the name and address of the resident agent upon whom service of process may be made, (d) the main line of business engaged in by the corporation, (e) the date of the last meeting of its board of directors, (f) whether the corporation has been actively engaged in business during the previous twelve (12) months or if its charter powers have been dormant and unused during that period, (g) the number of the shares of the capital stock of such corporation with the par value thereof, (h) the total amount of capital stock, and if a foreign corporation the amount of its capital stock allocated for use in the State of Florida, (i) such other information as may be needed to show whether the corporation is active or inactive, and (j) such other information as may be necessary for the secretary of state to have in carrying out the provisions of this section and §608.33.

(2) Provided, that railroad, pullman, telephone, telegraph, insurance, banking and trust companies, building and loan associations, cooperative associations, corporations not for profit and corporations paying the maximum capital stock tax, shall be required to furnish the information required under (a) through (f) of subsection (1) hereof only.

(3) All reports herein required shall be for the calendar year and shall be due to be filed on July 1st of each year and the tax payable under §608.33 shall be paid at that time.

**608.33 Capital stock tax.—**

(1) Every corporation, except railroad, pullman, telephone, telegraph, insurance, banking and trust companies, building and loan associations, cooperative marketing associations and corporations not for profit, doing business in this state shall pay to the state for the use of the state a capital stock tax according to the following schedule:

SCHEDULE FOR CAPITAL STOCK TAX

| | |
|---|---|
| For all corporations with capital stock not exceeding $10,000.00 | $ 10.00 |
| For capital stock of over $10,000.00 and not over $25,000.00 | 25.00 |
| For capital stock of over $25,000.00 and not over $50,000.00 | 50.00 |
| For capital stock of over $50,000.00 and not over $100,000.00 | 75.00 |
| For capital stock of over $100,000.00 and not over $200,000.00 | 100.00 |
| For capital stock of over $200,000.00 and not over $500,000.00 | 200.00 |
| For capital stock of over $500,000.00 and not over $1,000,000.00 | 500.00 |
| For capital stock of over $1,000,000.00 and not over $2,000,000.00 | 750.00 |
| For capital stock of over $2,000,000.00 | 1,000.00 |

The capital stock above mentioned refers to the invested capital represented by shares of stock outstanding.

(2) In the case of any Florida corporation having been organized or any foreign corporation which has been authorized to do business in Florida, less than twelve (12) months at the time the report is due and the capital stock tax is to be paid, the tax due that year shall be pro rated according to the number of months the corporation has been in existence or authorized to do business in this state.

(3) Nothing in this section or in §608.32 shall apply to any corporation that has been adjudged bankrupt or dissolved by order of court except that any such corporation shall file a statement setting forth its status in that respect, but shall not be required to pay the capital stock tax.

(4) In the event any of the shares of stock of any such corporation should be no par value, then for the purposes of this section, each share shall be presumed to have value of at least one hundred dollars ($100.00) per share, which presumption may be overcome by actual proof submitted to the secretary of state. The secretary of state shall make such investigation as he may consider necessary and increase or decrease the value of no par value stock as he may determine to be correct; and in so doing he may take into consideration all facts tending to show the fair market value of the stock, including its sale price, the amount of the surplus of the corporation and such other pertinent facts as he may deem advisable.

**608.34 Duties of secretary of state.**—The secretary of state shall prescribe the form and furnish the blanks upon request to make the annual reports called for in §608.31, examine the reports when received and if the information called for is given in such reports, he shall file the same as information and keep such reports as public records. He shall pay into the state treasury to be used for such purposes as the legislature may determine all moneys collected under the provisions of §608.33. He shall cause a notice of the requirements of §§608.32-608.33, to be mailed to the last known address of every corporation doing business in the state which shall fail to file within thirty (30) days after July 1st, the report required by §608.32 or pay the capital stock tax imposed by §608.33.

**608.35 Penalty for failure to file report and pay tax.**—Any corporation failing to comply with the provisions of §§608.32 and 608.33 for six (6) months shall not be permitted to maintain or defend any action in any court of this state until such reports are filed and all taxes due under this chapter be paid.

(DO NOT DETACH)

Form D.C.T.R. — For Domestic Corporations

# Corporation Report and Tax Returns
to the
# Secretary of State of Florida

As required by Chapter 608, Florida Statutes, 1953

Date Rec. SEP 8 1954
Amt. Rec. ____
Amt. of Tax ____
75.00

HON. R. A. GRAY, Secretary of State,
Tallahassee, Florida.

1954

SIR:

In compliance with the law above referred to we submit below information called for and enclose remittance for $ 75.00 to pay the tax imposed by said law.

(1) That Seacomber Hotel Corp.
(Give correct name of corporation)

Principal place of business 1725 Collins Ave., Miami Beach, Florida

Insert to whom receipt is to be mailed Same

a corporation duly organized and existing under the laws of the State of Florida, with its principal place of business within the State at Miami Beach, County of Dade, has designated and established 1725 Collins Ave. City of Miami, County of Dade, State of Florida, as its place of business or domicile for the service of process within the State, and has named and does hereby name as its agent Jack Lieberbaum, 1717 Collins Ave., Miami Beach, Fla.

(2) NAMES AND ADDRESSES OF OFFICERS: BE SURE AND AFFIX TITLES:

| Name | Address |
|---|---|
| Edward J. Mirmelli, Pres. | Chicago, Ill. |
| Louis Lieberbaum, Vice Pres. | Belle Harbor, N. Y. |
| Jack Lieberbaum, Secretary | Miami Beach, Fla. |
| Lawrence Mirmelli, Treas. | Chicago, Ill. |

(3) NAMES AND ADDRESSES OF DIRECTORS:

| Name | Address |
|---|---|
| SAME AS (2) ABOVE. | |

(4) General nature of main business engaged in Hotel

(5) Date incorporated March 10, 1948

☞ (See copy of law printed herein).

Date of last meeting of Board of Directors

Is Corporation active? Yes If inactive, state how long

Is the purpose of the Corporation to begin operations in the future?

## CAPITAL STOCK STATEMENT

(6) The total authorized capital stock as follows:

_______ shares of the par value of _______ each

50 shares without nominal or par value

OUTSTANDING CAPITAL STOCK AS FOLLOWS:

_______ shares of the par value of _______ each $_______

33-1/4 shares without nominal or par value; actual (Be sure and show number of shares issued and their actual value. Evidence of actual value may be shown by a condensed sheet.) . . . . . . . . $ 70,833.40

Total outstanding capital stock . . . . . . . . . . . . . . . . $

Tax as per schedule . . . . . . . . . . . . . . . . . . . . . . $ 75.00

ONLY ONE REPORT NECESSARY WHERE MORE THAN ONE YEAR'S TAX IS PAID AT THE TIME OF FILING.

(7) We, the undersigned, certify the above state of facts to be true and correct as shown by our books.

(SEAL) Edward J. Mirmelli Pres.

By President or Vice-President

ATTEST:

Secretary

STATE OF FLORIDA,

COUNTY OF Dade

Personally appeared before me Edward J Mirmelli

who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 3 day of September 1954

(SEAL) Edward J. Mirmelli Pres.

(Signature of officer taking acknowledgment)

Mildred Jackson Notary Public

Notary Public, State of Florida at Large
My commission expires August 3, 1958.
Bonded by American Surety Co. of N. Y.

SEC. 34.66-P.L.&R.
PERMIT NO. 6
TALLAHASSEE, FLA.

FROM
R. A. GRAY
SECRETARY OF STATE
TALLAHASSEE, FLA.

No. A 54287-G

Tax for Years

1955-56-57-58-59

CORPORATION REPORT AND
TAX RETURN OF

Sumember Hotel
Corp.

P. O. ADDRESS

(Do not write below this line)

Filed in the office of the Secretary of State of the State of Florida, this ______ day of ______, A. D. 19____

Secretary of State.

CAPITAL PRINTING, INC.

(DO NOT DETACH)

# ANNUAL CORPORATION CAPITAL STOCK TAX LAW

608.32 Annual report of corporations; contents.—

(1) All corporations heretofore or hereafter incorporated in this state and all foreign corporations heretofore or hereafter authorized to do business in this state are required to file with the secretary of state on or before July 1st of each year a sworn report, on such form as the secretary of state shall prescribe, giving (a) the name of each officer and director and his post office address, (b) the home office of the corporation, (c) the name and address of the resident agent upon whom service of process may be made, (d) the main line of business engaged in by the corporation, (e) the date of the last meeting of its board of directors, (f) whether the corporation has been actively engaged in business during the previous twelve (12) months or if its charter powers have been dormant and unused during that period, (g) the number of the shares of the capital stock of such corporation with the par value thereof, (h) the total amount of capital stock, and if a foreign corporation the amount of its capital stock allocated for use in the State of Florida, (i) such other information as may be needed to show whether the corporation is active or inactive, and (j) such other information as may be necessary for the secretary of state to have in carrying out the provisions of this section and §608.33.

(2) Provided, that railroad, pullman, telephone, telegraph, insurance, banking and trust companies, building and loan associations, cooperative associations, corporations not for profit and corporations paying the maximum capital stock tax, shall be required to furnish the information required under (a) through (f) of subsection (1) hereof only.

(3) All reports herein required shall be for the calendar year and shall be due to be filed on July 1st of each year and the tax payable under §608.33 shall be paid at that time.

608.33 Capital stock tax.—

(1) Every corporation, except railroad, pullman, telephone, telegraph, insurance, banking and trust companies, building and loan associations, cooperative marketing associations and corporations not for profit, doing business in this state shall pay to the state for the use of the state a capital stock tax according to the following schedule:

SCHEDULE FOR CAPITAL STOCK TAX

| | |
|---|---|
| For all corporations with capital stock not exceeding $10,000.00 | $ 10.00 |
| For capital stock of over $10,000.00 and not over $25,000.00 | 25.00 |
| For capital stock of over $25,000.00 and not over $50,000.00 | 50.00 |
| For capital stock of over $50,000.00 and not over $100,000.00 | 75.00 |
| For capital stock of over $100,000.00 and not over $200,000.00 | 100.00 |
| For capital stock of over $200,000.00 and not over $500,000.00 | 200.00 |
| For capital stock of over $500,000.00 and not over $1,000,000.00 | 500.00 |
| For capital stock of over $1,000,000.00 and not over $2,000,000.00 | 750.00 |
| For capital stock of over $2,000,000.00 | 1,000.00 |

The capital stock above mentioned refers to the invested capital represented by shares of stock outstanding.

(2) In the case of any Florida corporation having been organized or any foreign corporation which has been authorized to do business in Florida, less than twelve (12) months at the time the report is due and the capital stock tax is to be paid, the tax due that year shall be pro rated according to the number of months the corporation has been in existence or authorized to do business in this state.

(3) Nothing in this section or in §608.32 shall apply to any corporation that has been adjudged bankrupt or dissolved by order of court except that any such corporation shall file a statement setting forth its status in that respect, but shall not be required to pay the capital stock tax.

(4) In the event any of the shares of stock of any such corporation should be no par value, then for the purposes of this section, each share shall be presumed to have value of at least one hundred dollars ($100.00) per share, which presumption may be overcome by actual proof submitted to the secretary of state. The secretary of state shall make such investigation as he may consider necessary and increase or decrease the value of no par value stock as he may determine to be correct; and in so doing he may take into consideration all facts tending to show the fair market value of the stock, including its sale price, the amount of the surplus of the corporation and such other pertinent facts as he may deem advisable.

608.34 Duties of secretary of state.—The secretary of state shall prescribe the form and furnish the blanks upon request to make the annual reports called for in §608.32, examine the reports when received and if the information called for is given in such reports, he shall file the same as information and keep such reports as public records. He shall pay into the state treasury to be used for such purposes as the legislature may determine all moneys collected under the provisions of §608.33. He shall cause a notice of the requirements of §§608.32-608.33, to be mailed to the last known address of every corporation doing business in the state which shall fail to file within thirty (30) days after July 1st, the report required by §608.32 or pay the capital stock tax imposed by §608.33.

608.35 Penalty for failure to file report and pay tax.—Any corporation failing to comply with the provisions of §§608.32 and 608.33 for six (6) months shall not be permitted to maintain or defend any action in any court of this state until such reports are filed and all taxes due under this chapter be paid.

TO CORPORATION ADDRESSED:

Corporation Capital Stock Tax is due July first each year. On the inside of the form herewith you will find the law in full. In filling out the form be sure and show all information provided for. Do not overlook showing the number of shares of stock issued and outstanding, and in case of shares of no par, show the amount actually invested in all outstanding shares, including any paid in surplus and any surplus set aside as part of the invested capital.

The corporation law requires that each and every corporation shall have not less than three directors, and be sure and show this number on the form.

R. A. Gray, *Secretary of State.*

WILSON & STONBERG
CERTIFIED PUBLIC ACCOUNTANTS
824 LINCOLN ROAD
MIAMI BEACH 39, FLORIDA
JEFFERSON 8-3841

ALLAN P. WILSON, C. P. A.
MARVIN E. STONBERG, C. P. A.

MEMBERS
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

March 24, 1959

Honorable R. A. Gray
Secretary of State
Tallahassee, Florida

Re: Seacomber Hotel Corp.
Surfcomber Hotel Corp.

Dear Sir:

Enclosed herewith please find checks in the amount of $275.00 for the Surfcomber Hotel Corp. and $375.00 for the Seacomber Hotel Corp.

Since the filing of these returns had to be expedited, my office was unable to examine prior years books and records in order to ascertain which years were deliquent in the filing of Form D.C.T.R.

The information contained on the attached balance sheets was obtained from copies of the U. S. Corporation Income Tax Returns for the respective fiscal years ended.

My office has been retained by the corporations as their accountant. Please advise me as to any deliquency which may now exist after applying the enclosed checks to the respective corporation accounts.

Thank you for your attention to this matter.

Very truly yours,

WILSON & STONBERG

By Allan P. Wilson
C.P.A.

APW:md
Encl.

SEACOMBER HOTEL CORP.

MIAMI BEACH, FLORIDA

BALANCE SHEET

| | DECEMBER 1, 1954 | DECEMBER 1, 1955 | DECEMBER 1, 1956 | DECEMBER 1, 1957 | DECEMBER 1, 1958 |
|---|---|---|---|---|---|
| TOTAL ASSETS | $ 646,250.39 | $ 669,767.47 | $ 599,962.85 | $ 583,062.53 | $ 546,024.42 |
| TOTAL LIABILITIES | $ 563,482.09 | $ 600,287.13 | $ 526,500.27 | $ 511,787.29 | $ 487,385.59 |
| CAPITAL STOCK | $ 5,000.00 | $ 5,000.00 | $ 5,000.00 | $ 5,000.00 | $ 5,000.00 |
| SURPLUS | 77,768.30 | 64,480.34 | 68,462.58 | 66,275.24 | 53,638.83 |
| TOTAL CAPITAL | $ 82,768.30 | $ 69,480.34 | $ 73,462.58 | $ 71,275.24 | $ 58,638.83 |
| TOTAL LIABILITIES AND CAPITAL | $ 646,250.39 | $ 669,767.47 | $ 599,962.85 | $ 583,062.53 | $ 546,024.42 |

STATEMENT PREPARED FROM THE BOOKS AND RECORDS WITHOUT COMPLETE INDEPENDENT VERIFICATION.

WILSON & STONBERG, CERTIFIED PUBLIC ACCOUNTANTS

(DO NOT DETACH)

Form D.C.T.R. — For Domestic Corporations

# Corporation Report and Tax Returns
to the
# Secretary of State of Florida

As required by Chapter 608, Florida Statutes, 1953

Date Rec. MAR 25 1959
Amt. Rec.
Amt. of Tax 375

HON. R. A. GRAY, Secretary of State,
Tallahassee, Florida.

SIR:

In compliance with the law above referred to we submit below information called for and enclose remittance for $ 375.00 to pay the tax imposed by said law.

(1) That Seacomber Hotel Corp.
(Give correct name of corporation)

Principal place of business 1725 Collins Ave., Miami Beach, Florida

Insert to whom receipt is to be mailed Dr. Edward Mirmelli

a corporation duly organized and existing under the laws of the State of Florida, with its principal place of business within the State at Miami Beach, Florida, County of Dade has designated and established City of Miami Beach, County of Dade, State of Florida, as its place of business or domicile for the service of process within the State, and has named and does hereby name as its agent upon whom service of process may be made:

Dr. Edward J. Mirmelli

Whose address is: C/O Surfcomber Hotel, 1717 Collins Ave., Miami Beach, Fla.

(2) NAMES AND ADDRESSES OF OFFICERS: BE SURE AND AFFIX TITLES:

| Name | | Address |
|---|---|---|
| Edward J. Mirmelli | President | 3814 S. Kedzie Ave., Chicago, Ill. |
| Sam Fidel | Vice President | 3814 S. Kedzie Ave., Chicago, Ill. |
| Lawrence Mirmelli | Secretary | 434 W. Division St., Chicago, Ill. |

(3) NAMES AND ADDRESSES OF DIRECTORS:

| Name | Address |
|---|---|
| Edward J. Mirmelli | 3814 S. Kedzie Ave., Chicago, Ill. |
| Sam Fidel | 3814 S. Kedzie Ave., Chicago, Ill. |
| Lawrence Mirmelli | 434 W. Division St., Chicago, Ill. |

(4) General nature of main business engaged in Hotel

(5) Date incorporated 3/10/48

☞ (See copy of law printed herein).

Date of last meeting of Board of Directors 2/28/59

Is Corporation active? Yes If inactive, state how long

Is the purpose of the Corporation to begin operations in the future? Yes

## CAPITAL STOCK STATEMENT

(6) The total authorized capital stock as follows:

_______ shares of the par value of _______ each

33-3/4 shares without nominal or par value

OUTSTANDING CAPITAL STOCK AS FOLLOWS:

_______ shares of the par value of _______ each $_______

11 1/4 shares without nominal or par value, actual

(Be sure and show number of shares issued and their actual value. Evidence of actual value may be shown by a condensed sheet.) $ Schedule Attached

Total outstanding capital stock $ " "

Tax as per schedule $ 375.00

ONLY ONE REPORT NECESSARY WHERE MORE THAN ONE YEAR'S TAX IS PAID AT THE TIME OF FILING.

(7) We, the undersigned, certify the above state of facts to be true and correct as shown by our books.

(SEAL) Edward J. Mirmelli Pres.
By President or Vice-President

ATTEST:

Lenore Mirmelli Sec.
Secretary

STATE OF FLORIDA,
COUNTY OF Dade

Personally appeared before me EDWARD J. ~~A~~ MIRMELLI

who deposes and says that he executed this certificate for and in behalf of said corporation, and that the statement therein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 21 day of March, 1959.

(SEAL) Allan P. Wilson
(Signature of officer taking acknowledgment)

Notary Public, State of Florida at Large
My Commission Expires: Sept. 23, 1961
Bonded by American Fire & Casualty Co.

No. A54287-h

Tax for Years

1960

**CORPORATION REPORT AND TAX RETURN OF**

Seacomber Hotel Corp. (The)

P. O. ADDRESS

(Do not write below this line)

Filed in the office of the Secretary of State of the State of Florida, this ____________ day of ____________ A. D. 19____

Secretary of State.

Form D. C. T. R.—For Domestic Corporations

# Corporation Report and Tax Return
to the
# Secretary of State of Florida
as required by Chapter 608, Florida Statutes

Date Rec. JUL 6 1960

Amt. Rec. 10

Make check payable and mail to Secretary of State, Tallahassee, Florida. This report is due on or before July 1st of each year.

1. NAME THE SEACOMBER HOTEL CORP c/o SURFCOMBER HOTEL
Give correct name
2. ADDRESS 1725 COLLINS AVE MIAMI BEACH, FLORIDA
of the principal place of business (Town) (County)
3. ADDRESS c/o DR. E.J. MIRMELLI 3814 S. Kedzie Ave Chicago, Illinois
where receipt for this payment is to be mailed
4. NAME OF RESIDENT AGENT Dr. E.J. Mirmelli ADDRESS 3814 SOUTH KEDZIE AVE CHICAGO, Illinois
5. NAMES AND ADDRESSES OF OFFICERS:

| NAME | TITLE | ADDRESS |
|---|---|---|
| EDWARD J. MIRMELLI | PRESIDENT | 3814 S. Kedzie Ave Chgo, Ill |
| Sam Fidel | Vice President | Same |
| Lawrence Mirmelli | Secretary | Same |

6. NAMES AND ADDRESSES OF DIRECTORS (law requires at least (3) Directors)

| NAME | ADDRESS |
|---|---|
| Dr. Edward J. Mirmelli | 3814 S. Kedzie Ave Chgo, Ill |
| Sam Fidel | Same |
| Lawrence Mirmelli | Same |

## CAPITAL STOCK STATEMENT

7. Total AUTHORIZED Capital Stock
_____ Shares of par value of $_____ each.
50 Shares without nominal or par value.

OUTSTANDING Capital Stock

8. _____ Shares of the par value of $_____ each. $_____
11 3/4 Shares without nominal or par value (actual) $ 5,000.00
Total OUTSTANDING capital stock $ 5,000.00

NO PAR value shares are presumed to have a value of least $100.00 per share, but report should be accompanied by a brief financial statement showing actual value, including surplus which has become a part of invested capital.

Only one (1) report necessary where more than one (1) year's tax is paid at the time of filing.

9. Date of last meeting of Directors Jan 5, 1960
Is corporation active? Yes If inactive, state how long
Is the purpose of the corporation to begin business in the future?
10. We the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli Pres. Attest: Lawrence Mirmelli (Corporate Seal)
By President or V-President Secretary

11. General nature of business engaged in Resort Hotel
12. Date incorporated 3-10-48

STATE OF FLORIDA
COUNTY OF Dade

Personally appeared before me Edward J. Mirmelli who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 29th day of June 19 60

(Notary Seal) NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JULY 6, 1962
Signature of Officer taking acknowledgement

ORIGINAL. Tear apart. Send in only the original. Keep COPY for your files.

PLEASE PRINT OR TYPE AND IT IS DESIRABLE THAT EACH APPLICABLE QUESTION BE ANSWERED.

Office of the

# Secretary of State

State of Florida

**Tallahassee**

TOM ADAMS
SECRETARY OF STATE

August 15, 1962

Leacomber
~~SURF~~COMBER HOTEL CORP. (THE)     7-30-2-22-53400-25.00
3814 South Kedzie Avenue
Chicago, Illinois

SEP 17-62 #2     75400 ****10.00

No. A-54287-I

Tax for Years

1961-62

CORPORATION REPORT AND

TAX RETURN OF

Seacomber

Hotel Corp.

(The)

P. O. ADDRESS

(Do not write below this line)

Filed in the office of the Secretary of State of the State of Florida, this ________

day of ________

A. D. 19____

________ Secretary of State.

Form D. C. T. R.—For Domestic Corporations

# Corporation Report and Tax Return
to the
# Secretary of State of Florida
as required by Chapter 608, Florida Statutes

Date Rec.
SEP 17 1962
Amt. Rec.
Sep 17-62 7/2 73701 - 10.00
JUL 30 2 22 53500 ****10.00
20.00

Make check payable and mail to Secretary of State, Tallahassee, Florida. This report is due on or before July 1st of each year. Amount remitted with this report $

1. NAME SEACOMBER HOTEL CORP (The)
(Give correct name)
2. ADDRESS % 1717 COLLINS AVE MIAMI BEACH - DADE - FLA
(of the principal place of business (Town)) (County)
3. ADDRESS 3814 So KEDZIE AVE - CHICAGO, ILL
(where receipt for this payment is to be mailed)
4. NAME OF RESIDENT AGENT DR. EDWARD J. MIRMELLI ADDRESS 3814 So. KEDZIE Avenue - Chicago, Ill
5. NAMES AND ADDRESSES OF OFFICERS:

| NAME | TITLE | ADDRESS |
|---|---|---|
| EDWARD J. MIRMELLI | PRESIDENT | 3814 S Kedzie Ave - Chgo ILL |
| SIDNEY ZAJAC | TREASURER | 1717 Collins Ave Miami Beach |
| LAWRENCE MIRMELLI | | 454 W. Division St. Chicago, ILL. |

6. NAMES AND ADDRESSES OF DIRECTORS (law requires at least (3) Directors)

| NAME | ADDRESS |
|---|---|
| SAME AS ITEM 5 ABOVE | |

CAPITAL STOCK STATEMENT

7. Total AUTHORIZED Capital Stock:
_______ Shares of par value of $_______ each.
50 [illegible] Shares without nominal or par value.

OUTSTANDING Capital Stock

8. _______ Shares of the par value of $_______ each, $ none
11 1/2 Shares without nominal or par value (actual) $ 5000.00
Total OUTSTANDING capital stock $ 5000

NO PAR value shares are assumed to have a value of at least $100.00 per share, but report should be accompanied by a brief financial statement showing actual value, including surplus which has become a part of invested capital.
Only one (1) report necessary where more than one (1) year's tax is paid at the time of filing.

9. Date of last meeting of Directors 1/10/62
Is corporation active? Yes If inactive, state how long
Is the purpose of the corporation to begin business in the future?
10. We the undersigned, certify the above statement of facts to be true and correct as shown by our books.

(Corporate Seal)

Edward J. Mirmelli Pres. Attest: Lawrence Mirmelli
By President or V-President Secretary

11. General nature of business engaged in Resort Hotel
12. Date incorporated 11-30-48

STATE OF FLORIDA
COUNTY OF DADE Edward J. Mirmelli
Personally appeared before me Lawrence Mirmelli who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.
Sworn to and subscribed before me this 7/7 day of July 1962

(Notary Seal) Notary Public, State of Florida at Large
My Commission Expires Aug. 14, [illegible]
Bonded by American Surety Co. of [illegible] or other officer authorized

ORIGINAL. Tear apart. Send in only the original. Keep COPY for your files.
PLEASE PRINT OR TYPE AND IT IS DESIRABLE THAT EACH APPLICABLE QUESTION BE ANSWERED.

# Corporation Report and Tax Return for Foreign and Domestic Corporations

1st Copy

State of Florida

## Secretary of State

Tallahassee, Florida

**Refer to This Number in All Correspondence**

**This return is due on July 1**

A 54287

1964

78-11- 4-15428

DELINQUENT AFTER 30 DAYS

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

1. SEACOMBER HOTEL CORP (Give exact name of corporation)
2. RESORT HOTEL (General nature of business)
3. 1717 COLLINS AVE. MIAMI BEACH FLORIDA DADE (Street or Post Office Box of principal place of business) (City) (County) (State)
4. a. EDWARD J. MIRMELLI PRESIDENT 3814 SOUTH KEDZIE AVE. CHICAGO, ILLINOIS (Officers-Name) (Title) (Address)
   b. LAWRENCE MIRMELLI SECRETARY 454 WEST DIVISION STREET CHICAGO, ILL
   c. SIDNEY ZAJAC VICE-PRESIDENT 1717 COLLINS AVE MIAMI BEACH FLORI
   d.
5. a. SAME AS ABOVE (Directors - Name) (Law requires at least (3) three) (Address)
   b.
   c.
   d.
6. EDWARD J. MIRMELLI 3814 SOUTH KEDZIE AVE CHICAGO, ILLINOIS (Resident Agent Name) (Address)

I hereby acknowledge acceptance of the appointment as resident agent upon whom service of process may be made ________ (Signature of resident agent)

7. Last meeting of Directors January 10, 1964 (Month - Day - Year) 8. Corporation Active? yes (Yes or No) 9. If inactive, inactivity began ________ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ________ (Yes or No) 11. Date Incorporated June 30, 1948 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. ________ (Month - Day - Year)

13. Total Authorized Capital Stock:

| | | |
|---|---|---|
| ________ (No. of shares with par value) | $ ________ (Par value each) | |
| ________ (No. of shares with par value) | $ ________ (Par value each) | |
| 50 (No. of shares without par or nominal value) | | |

14. Outstanding Capital Stock:

| | | | |
|---|---|---|---|
| (a) ________ (No. of shares with par value) | $ ________ (Par value each) | $ ________ (Total value) | |
| (b) ________ (No. of shares with par value) | (Par value each) | (Total value) | |
| (c) 41 1/8 (No. of shares without par or nominal value) | | 25,000 (Total stated value) | 00 |
| (d) Total (a) + (b) + (c) | | $ 25,000 (Total value) | 00 |

15. If foreign corporation, give amount of capital employed in Florida. $________ 16. If foreign corporation, give the number of States in which you do business. ________

17. Amount of tax remitted with this return $ 50.00

18. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

E. J. Mirmelli
By President or V-President

Attest: Lawrence Mirmelli
Secretary

STATE OF Illinois
COUNTY OF Cook

Personally appeared before me EDWARD J. MIRMELLI & LAWRENCE MIRMELLI who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 24th day of July 1964

(Notary Seal) ________ (Signature of officer taking acknowledgment)

Send Original and 1st COPY TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

1st COPY

RECEIVED

964 AUG 17 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1st Copy

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida

## Secretary of State

Tallahassee, Florida

Refer to This Number in All Correspondence

This return is due on July 1

A-34287

SEACOMBER HOTEL CORP -THE-  78-11-X-154287  1965
%R E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

(INSERT ZIP CODE IF NOT SHOWN)

1. SEACOMBER HOTEL CORP. (Give exact name of corporation)

2. RESORT HOTEL (General nature of business)

3. 1717 COLLINS AVE. (Street or Post Office Box of principal place of business) MIAMI BEACH FLORIDA (City) DADE (County) FLA. (State)

4. a. EDWARD MIRMELLI (Officers-Name) PRESIDENT (Title) 3814 SOUTH KEDZIE AVE. CHICAGO ILL. (Address)

b. LAWRENCE MIRMELLI SECRETARY 654 WEST DIVISION ST CHICAGO ILL.

c. SIDNEY ZAJAC VICE-PRESIDENT 1717 COLLINS AVE. MIAMI BEACH, FLA.

d.

5. a. SAME AS ABOVE (Directors - Name) (Law requires at least (3) three) (Address)

b.

c.

d.

6. EDWARD J. MIRMELLI (Resident Agent Name) 3814 SOUTH KEDZIE AVE. CHICAGO, ILLINOIS (Address)

I hereby acknowledge acceptance of the appointment as resident agent upon whom service of process may be made. ______ (Signature of resident agent)

7. Last meeting of Directors January 10, 1965 (Month - Day - Year) 8. Corporation Active? yes (Yes or No) 9. If inactive, inactivity began ______ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ______ (Yes or No) 11. Date Incorporated June 30, 1941 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. Total Authorized Capital Stock:

______ (No. of shares with par value) $ ______ (Par value each)

______ (No. of shares with par value) $ ______ (Par value each)

250 (No. of shares without par or nominal value)

14. Outstanding Capital Stock:

(a) ______ (No. of shares with par value) $ ______ (Par value each) $ ______ (Total value)

(b) ______ (No. of shares with par value) ______ (Par value each) ______ (Total value)

(c) 11 1/2 (No. of shares without par or nominal value) 25,000.00 (Total actual value)

(d) Total (a) + (b) + (c) $ 25,000.00 (Total value)

15. Amount of tax Due $ ______

16. Less Credit Memo if any $ ______

17. Amount of tax remitted with this return $ 50.00

18. If foreign corporation, give amount of capital employed in Florida. $ ______

19. If foreign corporation, give the number of States in which you do business. 2

20. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli
By President ~~or V-President~~

Attest: Lawrence Mirmelli
Secretary

STATE OF Illinois

COUNTY OF Cook

Personally appeared before me Edward J. Mirmelli & Lawrence Mirmelli who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 6th day of May 1965.

Alvin Radish
Signature of Notary taking acknowledgment

(Notary Seal)

Send Original and 1st COPY TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA. 1st COPY

FORM PRC-109 (SEE INSTRUCTIONS ON BACK OF LAST COPY)

RECEIVED
MAY 18 10 25 AM '65
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1st Copy

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida

## Secretary of State

FILED

Tallahassee, Florida

1966 MAY 11 PM 12:52

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Refer to This Number In All Correspondence: 78-11-A-154287

This return is due on July 1 1966

A-154287

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

2. RESORT HOTEL (General nature of business)

1. SEACOMBER HOTEL CORP. (Give exact name of corporation)

3. 1717 COLLINS AVE - MIAMI BEACH - DADE - FLA. (Street or Post Office Box of principal place of business) (City) (County) (State)

4. a. [illegible] PRESIDENT 3814 SO KEDZIE AVE, CHICAGO, ILL. (Officers-Name) (Title) (Address)

b. LAWRENCE MIRMELLI SECRETARY 1717 COLLINS AVE, MIAMI BEACH, FLA.

c. ~~GEORGE~~ ZAJAC VICE-PRESIDENT 730-83rd ST. MIAMI BEACH, FLA.

d.

5. a. SAME AS ABOVE (Directors - Name) (Law requires at least (3) (three)) (Address)

b.

c.

d.

6. DR EDWARD J. MIRMELLI - ~~XXXX~~ 3814 SO. KEDZIE AVE., CHICAGO, ILL. (Resident Agent Name) (Address)

7. Last meeting of Directors Jan 10 1966 (Month - Day - Year) 8. Corporation Active? yes (Yes or No) 9. If inactive, inactivity began ______ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ______ (Yes or No) 11. Date Incorporated 6-30-1948 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. Total Authorized Capital Stock:

______ (No. of shares with par value) $ ______ (Par value each)

______ (No. of shares with par value) $ ______ (Par value each)

50 (No. of shares without par or nominal value)

14. Outstanding Capital Stock: (issued)

(a) ______ (No. of shares with par value) $ ______ $ ______ (Total value)

(b) ______ (No. of shares with par value) ______ (Par value each) ______ (Total value)

(c) 50 / 18 66 ______ $25,000.00 (Total actual value)

(d) Total (a) + (b) + (c) $25,000.00

15. Amount of tax Due $______

16. Less Credit Memo if any $______

17. Penalty and Interest (see instructions) $50.00

18. Amount of tax remitted with this return $______

19. If foreign corporation, give amount of capital employed in Florida. $______

20. If foreign corporation, give the number of States in which you do business ______

21. We the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli, Pres.
(President or V-President)

Attest: Lawrence Mirmelli
Secretary

STATE OF FLORIDA
COUNTY OF DADE

Personally appeared before me Edward J. Mirmelli & Lawrence Mirmelli who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 10th day of May 1966

Lillian S. [illegible]
Signature of Notary
NOTARY PUBLIC STATE OF FLORIDA at LARGE
MY COMMISSION EXPIRES NOV. 17, 1969

(Notary Seal)

Send Original TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA
Send First copy to Secretary of State, Tallahassee, Florida

1st COPY

(SEE INSTRUCTIONS ON BACK OF LAST COPY)

A-154287

1st Copy

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida

## Secretary of State

Tallahassee, Florida

FILED

1967 MAR 28 PM 2:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Seacomber Hotel Corporation

Refer to This Number In All Correspondence: A-154287

This return is due on July 1: 1963

1. SEACOMBER HOTEL CORPORATION
(Give exact name of corporation)

2. (General nature of business) RESORT HOTEL

3. 1717 COLLINS AVE.-MIAMI BEACH- DADE-FLORIDA 33139
(Street or Post Office Box of principal place of business) (City) (County) (State)

4. a [illegible] PRESIDENT [illegible] 3814 SO. KEDZIE AVE. CHICAGO, ILL
(Officers-Name) (Title) (Address)

b [illegible] SECRETARY- 1717 COLLINS AVE. MIAMI BEACH. FLA.

c

d SYDNEY ZAJAC - VICE-PRESIDENT 730 - 83rd ST. MIAMI BEACH, FLA.

5. a SAME AS ABOVE
(Directors - Name) (Law requires at least (3) three) (Address)

b

c

d

6. Dr. EDWARD J. MIRMELLI 3814 SO. KEDZIE AVE. CHICAGO, ILL.
(Resident Agent Name) (Address)

I hereby acknowledge acceptance of the appointment as resident agent upon whom service of process may be made ______
(Signature of resident agent)

7. Last meeting of Directors ______ (Month - Day - Year)

8. Corporation Active? yes (Yes or No)

9. If inactive, inactivity began ______ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ______ (Yes or No)

11. Date Incorporated 6-30-1948 (Month - Day - Year)

12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. Total Authorized Capital Stock:

| (No. of shares with par value) | (Par value each) |
|---|---|
| | $ |
| | $ |
| 150 (No. of shares without par or nominal value) | |

14. Outstanding Capital Stock:

| | (No. of shares with par value) | (Par value each) | (Total value) |
|---|---|---|---|
| (a) | | $ | $ |
| (b) | | | |
| (c) | 11 1/8 (No. of shares without par or nominal value) | | 25,000.00 (Total actual value) |
| (d) Total (a) + (b) + (c) | | | $ 25,000.00 (Total value) |

15. Amount of tax Due $ 25.00

16. Less Credit Memo if any $ ______

17. Amount of tax remitted with this return $ 25.00

18. If foreign corporation, give amount of capital employed in Florida. $ ______

19. If foreign corporation, give the number of States in which you do business. ______

20. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

[signature]
By President

Attest: Lawrence Mirmelli
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me Edward J. Mirmelli + Lawrence Mirmelli who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 28th day of March 19 67

Lillian L. Daggett
Signature of Notary taking acknowledgment

(Notary Seal)

Send Original and 1st COPY TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA.

1st COPY

1st Copy

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida

## Secretary of State

Tallahassee, Florida

FILED

1967 JUN -6 PM 4:40

Refer to This Number in All Correspondence

This return is due on July 1

SEACOMBER HOTEL CORP. -INC-
OF E. J. MIRMELLI
3814 S. KEDZIE AVE
CHICAGO ILL

78-11-A-154287
06/30/68

SECRETARY OF STATE
TALLAHASSEE FLORIDA

1967

1. SEACOMBER HOTEL CORP. (Give exact name of corporation)
2. RESORT HOTEL (General nature of business)
3. 1717 COLLINS AVE. - MIAMI BEACH - DADE - FLORIDA
(Street or Post Office Box of principal place of business) (City) (County) (State)
4. a. EDWARD J. MIRMELLI - PRESIDENT - 3814 SO. KEDZIE AVE. CHICAGO.
(Officers-Name) (Title) (Address)
b. LAWRENCE MIRMELLI - SECRETARY - 1717 COLLINS AVE. - MIAMI BEACH, FLORIDA
c. [illegible]
d.
5. a. SAME AS ABOVE
(Directors - Name) (Law requires at least (3) three) (Address)
b.
c.
d.
6. DR. EDWARD J. MIRMELLI - 3814 SO. KEDZIE AVE. CHICAGO, ILL.
(Resident Agent Name) (Address)
7. Last meeting of Directors Jan. 10, 1967 (Month - Day - Year)
8. Corporation Active? YES (Yes or No)
9. If inactive, inactivity began ______ (Month - Day - Year)
10. If inactive, will corporation begin business in the future? ______ (Yes or No)
11. Date Incorporated 5-30-1948 (Month - Day - Year)
12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. Total Authorized Capital Stock:

| | |
|---|---|
| (No. of shares with par value) | $ (Par value each) |
| (No. of shares with par value) | $ (Par value each) |
| 50 (No. of shares without par or nominal value) | |

14. Outstanding Capital Stock: (issued)

| | | | |
|---|---|---|---|
| (a) | (No. of shares with par value) | $ (Par value each) | $ (Total value) |
| (b) | (No. of shares with par value) | (Par value each) | (Total value) |
| (c) | 35 1/3 (No. of shares without par or nominal value) | | 25,000.00 (Total actual value) |
| (d) Total (a) + (b) + (c) | | | $ 25,000.00 (Total value) |

15. Amount of tax Due $
16. Less Credit Memo if any $
17. Penalty and Interest (if applicable) $
18. Amount of tax remitted with this return $ 50.00
19. If foreign corporation, give amount of capital employed in Florida. $
20. If foreign corporation, give the number of States in which you do business.

We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

[signature] Pres.
By President or V-President

Attest: [signature]
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me Edward J. Mirmelli & Lawrence Mirmelli who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 22nd day of May 1967.

(Notary Seal)

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES NOV. 17, 1969
BONDED THROUGH FRED W. DIESTELHORST

[signature]
Signature of Notary taking acknowledgment

Send Original (with Remittance) TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA
Send First copy to Secretary of State, Tallahassee, Florida

1st COPY

(SEE INSTRUCTIONS ON BACK OF LAST COPY)

A-54281

1st Copy

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida

FILED

## Secretary of State

Tallahassee, Florida

1968 JUN 20 AM 10 2

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Refer to This Number in All Correspondence: 79-11-4-154287 06/30/48

This return is due on July 1: 1968

SEACOMBER HOTEL CORP -THE-
OR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

1. SEACOMBER HOTEL CORP. (Give exact name of corporation)
2. RESORT HOTEL (General nature of business)
3. 1717 Collins Avenue (Street or Post Office Box of principal place of business) — Miami Beach (City) — Dade (County) — Florida (State)
4. (Officers-Name) (Title) (Address)
   a. Edward J. Mirmelli — President — 3814 South Kedzie Avenue, Chicago, Ill.
   b. Lawrence Mirmelli — Secretary — 1717 Collins Avenue, Miami Beach, Fla.
   c. Sidney Zajac — Vice President — 730 - 83rd St., Miami Beach, Fla.
   d.
5. (Directors - Name) Law requires at least (3) three — (Address)
   a. Edward J. Mirmelli — 3814 South Kedzie Avenue, Chicago, Ill.
   b. Lawrence Mirmelli — 1717 Collins Avenue, Miami Beach, Fla.
   c. Sidney Zajac — 730 - 83rd St., Miami Beach, Fla.
   d.
6. Edward J. Mirmelli (Resident Agent Name) — 3814 South Kedzie Avenue, Chicago, Ill. (Address)
7. Last meeting of Directors: January 10, 1968 (Month - Day - Year)
8. Corporation Active? Yes (Yes or No)
9. If inactive, inactivity began: ______ (Month - Day - Year)
10. If inactive, will corporation begin business in the future? ______ (Yes or No)
11. Date Incorporated: 6-30-1948 (Month - Day - Year)
12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. Total Authorized Capital Stock:

| | |
|---|---|
| (No. of shares with par value) | $ (Par value each) |
| (No. of shares with par value) | $ (Par value each) |
| 50 (No. of shares without par or nominal value) | |

14. Outstanding Capital Stock: (issued)

| | No. of shares | Par value each | Total value |
|---|---|---|---|
| (a) | | $ | $ |
| (b) | | | |
| (c) | 11 1/8 | | 25,000.00 |
| (d) Total (a) + (b) + (c) | | | $ 25,000.00 |

15. Amount of tax Due: $ 50.00
16. Less Credit Memo if any: $
17. Penalty and Interest (see instructions): $
18. Amount of tax remitted with this return: $ 50.00
19. If foreign corporation, give amount of capital employed in Florida: $
20. If foreign corporation, give the number of States in which you do business: ______
21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli
By President or V-President

Attest: Lawrence Mirmelli
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me ______ who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 20th day of June 1968

[signature]
Signature of Notary taking acknowledgment

(Notary Seal)

FORM FRC-100 Send Original (with Remittance) TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA
Send First copy to Secretary of State, Tallahassee, Florida

(SEE INSTRUCTIONS ON BACK OF LAST COPY)

1st COPY

A-154287

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida
DEPARTMENT OF REVENUE
Tallahassee, Florida

RECEIVED
JUN 8 11 54 AM '70
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Refer to This Number In All Correspondence

This return is due on July 1

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

78-11-A-154287
06/30/48

1970

1. THE SURFCOMBER HOTEL CORP. (Give exact name of corporation)

2. (General nature of business) RESORT HOTEL

3. 1717 Collins Avenue (Street or Post Office Box of principal place of business) Miami Beach (City) Dade (County) Florida (State)

4. a. Edward J. Mirmelli (Officers-Name) President (Title) 3814 S. Kedzie Ave. Chicago, Ill (Address)
b. Lawrence Mirmelli Secretary 1717 Collins Ave., Miami Beach
c. Sidney Zajac Treasurer 730 - 83rd St. Miami Beach, Fla.
d.

5. a. Same as above (Directors - Name) (Law requires at least (3) three) (Address)
b.
c.
d.

6. Edward J. Mirmelli (Resident Agent Name) (Address)

7. Last meeting of Directors January 10, 1969 (Month - Day - Year)
8. Corporation Active? Yes (Yes or No)
9. If inactive, inactivity began (Month - Day - Year)

10. If inactive, will corporation begin business in the future? (Yes or No)
11. Date Incorporated 6-30-48 (Month - Day - Year)
12. If foreign corporation, Date Qualified in Fla. (Month - Day - Year)

13. Total Authorized Capital Stock:
(No. of shares with par value) $ (Par value each)
(No. of shares with par value) $ (Par value each)
50 (No. of shares without par or nominal value)

14. Outstanding Capital Stock: (issued)
(a) (No. of shares with par value) $ (Par value each) $ (Total value)
(b) (No. of shares with par value) (Par value each) (Total value)
(c) 11 1/8 (No. of shares without par or nominal value) 25,000.00 (Total actual value)
(d) Total (a) + (b) + (c) $ 25,000.00 (Total value)

15. Amount of tax Due $ 50.00

16. Less Credit Memo if any $

17. Penalty and Interest (see instructions) $

18. Amount of tax remitted with this return $ 50.00

19. If foreign corporation, give amount of capital employed in Florida. $

20. If foreign corporation, give the number of States in which you do business.

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli
By President or V-President

Attest: ______
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me ______ who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 3 day of June, 1970

______
Signature of Notary taking acknowledgment

(Notary Seal)

Send Original (with Remittance) TO THE DEPARTMENT OF REVENUE, TALLAHASSEE, FLORIDA
Send First copy to The Department of State, Tallahassee, Florida

FORM DR-108

1st COPY

(SEE INSTRUCTIONS ON BACK OF LAST COPY)

78-11-A-154287 06/30/48

[illegible] HOTEL CORP -THE-

1

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287

#8203R Third Cut

Page 1

# CORPORATE PRIVILEGE TAX RETURN
# FOR FOREIGN AND DOMESTIC CORPORATIONS

State of Florida
DEPARTMENT OF REVENUE
Tallahassee, Florida

Taxable Period 7-1-71 through 12-31-71
Delinquent if filed after 11-1-71

Refer to This Number in All Correspondence

PAY TO ... BANK, BANKER OR TRUST COMPANY ... FOR DEPOSIT ONLY — DEPARTMENT OF REVENUE

78-11-A-154287 1971
06730748

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

DEC-15-71 77544 KS 1 54287 OLST — RT 37.50

REMOVE PERFORATED EDGES FROM BOTH SIDES AND READ INSTRUCTIONS ON BACK OF PAGE 1 OF ORIGINAL

1. SEACOMBER HOTEL CORP. (Give exact name of corporation) 2. Employer ID #

3. a. 1717 COLLINS AVENUE, MIAMI BEACH (Street Address of Home Office) (City) DADE (County) FLORIDA (State) (Zip)

b. (Mailing Address if other than Home Office)

4. a. EDWARD J. MIRMELLI - PRESIDENT - 3814 S. KEDZIE AVENUE, CHICAGO, ILL. (Officers Names) (Title) (Street Address)

b. LAWRENCE MIRMELLI - SECRETARY - 1717 COLLINS AVE., MIAMI BEACH, FLA.

c. SIDNEY ZAJAC-Vice PRESIDENT - 730 83rd STREET, MIAMI BEACH, FLORIDA

d.

5. a. SAME AS ABOVE (Directors, Trustees or Managers) (Street Address)

b.

c.

d.

6. DR. EDWARD J. MIRMELLI - 3814 S. KEDZIE AVENUE, CHICAGO, ILLINOIS (Resident Agent Name) (Street Address)

7. Last meeting of Directors 1-10-71 (Month - Day - Year) 8. Corporation Active? Yes (Yes or No) 9. If inactive, inactivity began ______ (Month - Day - Year)

10. General Nature of Business ______ 11. Date Incorporated 6-30-48 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. Capital Stock:

| | Class or Type | Par or Stated Value | Shares Authorized | Shares Issued Number | Book Value |
|---|---|---|---|---|---|
| (a) | Common | $500.00 | | 50 | $ 25,000.00 |
| (b) | | | | | $ |
| (c) | | | | | $ |
| (d) | | | | | $ |
| (e) | Total Book Value of Stock Issued | | | | $ 25,000.00 |

14. If you do not have capital stock, describe the general rules applicable to all members by which the property rights and interests of each are determined ______

ORIGINAL

15. Close of annual accounting period for this return November 30 1971. (See General Instructions)

16. I/We declare that all Florida documentary stamp taxes applicable to corporate stock transactions for the 12 month period ending June 30, 1971 have been paid as required under Chapter 201, Florida Statutes, and I/we further declare that this return is true and correct.

[Corporate Seal]

THE SEACOMBER HOTEL CORP.
(Corporation Name)

Attest: Lawrence Mirmelli
Secretary or Assistant Secretary

By: Edward J. Mirmelli
President or Vice President

37.50

Send Original Copies (with Remittance) TO THE DEPARTMENT OF REVENUE, TALLAHA...
Send Department of State Copy to The Department of State, Tallahass...

$ 37.50

CAR. D.C. 1100

# Corporation Report and Tax Return for Foreign and Domestic Corporations

0011116

State of Florida
DEPARTMENT OF REVENUE
Tallahassee, Florida

Refer to This Number in All Correspondence

This return is due on July 1

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

78-11-A-154287
06/30/48

1971

MAY-3-71 910726 JH 1 54287 ---CK --- 50.00

1. THE SEACOMBER HOTEL CORP. (Give exact name of corporation)
2. Resort Hotel (General nature of business)

3. 1717 Collins Avenue (Street or Post Office Box of principal place of business) Miami Beach (City) Dade (County) Florida (State)

| | (Officers-Name) | (Title) | (Address) |
|---|---|---|---|
| 4. a. | Edward J. Mirmelli | President | 3814 S. Kedzie Ave., Chicago, Ill. |
| b. | Lawrence Mirmelli | Secretary | 1717 Collins Ave., Miami Beach, Fla. |
| c. | Sidney Zajac | Treasurer | 730 - 83rd St., Miami Beach, Fla. |
| d. | | | |

5. a. Same as above (Directors-Name) (Law requires at least (3) three) (Address)
b.
c.
d.

6. Edward J. Mirmelli (Resident Agent Name) (Address)

7. Last meeting of Directors 1-10-69 (Month - Day - Year) 8. Corporation Active? Yes (Yes or No) 9. If inactive, inactivity began ____ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ____ (Yes or No) 11. Date Incorporated 6-30-48 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. ____ (Month - Day - Year)

13. Total Authorized Capital Stock:

| (No. of shares with par value) | (Par value each) |
|---|---|
| | $ |
| | $ |
| 50 (No. of shares without par or nominal value) | |

14. Outstanding Capital Stock: (issued)

| | (No. of shares with par value) | (Par value each) | (Total value) |
|---|---|---|---|
| (a) | | $ | $ |
| (b) | | | |
| (c) | 11 1/8 (No. of shares without par or nominal value) | | 25,000.00 (Total actual value) |
| (d) Total (a) + (b) + (c) | | | $ 25,000.00 (Total value) |

15. Amount of tax Due $ 50.00
16. Less Credit Memo if any $
17. Penalty and Interest (see instructions) $
18. Amount of tax remitted with this return $ 50.00

19. If foreign corporation, give amount of capital employed in Florida. $
20. If foreign corporation, give the number of States in which you do business.

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli
By President or V-President

Attest: Lawrence Mirmelli
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me ____
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this ____ day of ____ 19__.

Signature of Notary taking acknowledgment

(Notary Seal)

FORM DR-105

Send Original (with Remittance) TO THE DEPARTMENT OF REVENUE, TALLAHASSEE, FLORIDA
Send First Copy to The Department of State, Tallahassee, Florida
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida
DEPARTMENT OF REVENUE
Tallahassee, Florida

Refer to This Number in All Correspondence

This return is due on July 1

78-11-A-194287    1970

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

PAY TO THE ORDER OF THE STATE TREASURER — BANK, BANKER, OR TRUST COMPANY — FOR DEPOSIT ONLY — N. P. 6349 — DEPARTMENT OF REVENUE

JUN-9-70 741415 J# 1 51287 — 50.00

(General nature of business) RESORT HOTEL

1. THE SURFCOMBER HOTEL CORP.
(Give exact name of corporation)

3. 1717 Collins Avenue — Miami Beach — Dade — Florida
(Street or Post Office Box of principal place of business) (City) (County) (State)

| | (Officers-Name) | (Title) | (Address) |
|---|---|---|---|
| 4. a. | Edward J. Mirmelli | President | 3814 S. Kedzie Ave., Chicago, Ill. |
| b. | Lawrence Mirmelli | Secretary | 1717 Collins Ave., Miami Beach |
| c. | Sidney Zajac | Treasurer | 730 - 83rd St. Miami Beach, Fla. |
| d. | | | |

5. a. Same as above
(Directors - Name) (Law requires at least (3) three) (Address)
b.
c.
d.

6. Edward J. Mirmelli
(Resident Agent Name) (Address)

7. Last meeting of Directors January 10, 1969 (Month - Day - Year)
8. Corporation Active? Yes (Yes or No)
9. If inactive, inactivity began ________ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ________ (Yes or No)
11. Date Incorporated 6-30-48 (Month - Day - Year)
12. If foreign corporation, Date Qualified in Fla. ________ (Month - Day - Year)

13. Total Authorized Capital Stock:
________ (No. of shares with par value) $ ________ (Par value each)
________ (No. of shares with par value) $ ________ (Par value each)
50 (No. of shares without par or nominal value)

14. Outstanding Capital Stock: (issued)
(a) ________ (No. of shares with par value) $ ________ (Par value each) $ ________ (Total value)
(b) ________ (No. of shares with par value) ________ (Par value each) ________ (Total value)
(c) 11 1/8 (No. of shares without par or nominal value) 25,000.00 (Total actual value)
(d) Total (a) + (b) + (c) $ 25,000.00 (Total value)

15. Amount of tax Due $ 50.00
16. Less Credit Memo if any $
17. Penalty and Interest (see instructions) $
18. Amount of tax remitted with this return $ 50.00

19. If foreign corporation, give amount of capital employed in Florida. $
20. If foreign corporation, give the number of States in which you do business.

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli Pr.
By President or V-President

Attest: Lawrence Mirmelli
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me ________
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 3 day of June 1970

Rudolph J. [illegible]
Signature of Notary taking acknowledgment

(Notary Seal)

Send Original (with Remittance) TO THE DEPARTMENT OF REVENUE, TALLAHASSEE, FLORIDA — ORIGINAL
Send First copy to The Department of State, Tallahassee, Florida

FORM DR-105

(SEE INSTRUCTIONS ON BACK OF LAST COPY)

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida
FLORIDA REVENUE COMMISSION
Tallahassee, Florida

Refer to This Number in All Correspondence: 78-11-A-154287 06/30/48

This return is due on July 1: 1969

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

JUN-30-69 587693 J4 1 514287 6 — CK — 50.00

1. SEACOMBER HOTEL CORP., (Give exact name of corporation)

2. (General nature of business) RESORT HOTEL

3. 1717 Collins Avenue (Street or Post Office Box of principal place of business) Miami Beach (City) Dade (County) Florida (State)

4. (Officers-Name) (Title) (Address)
a. Edward J. Mirmelli — President — 3814 So.Kedzie ave. Chicago,Ill
b. Lawrence Mirmelli — Secretary — 1717 Collins ave.Miami Beach,Fla
c. Sidney Zajac — Vice-Presedent — 730 83rd.St.Miami Beach,Fla.
d.

5. (Directors - Name) (Law requires at least (3) three) (Address)
a. Edward J. Mirmelli — 3814 So.Kedzie ave. Chicago,Ill.
b. Lawrence Mirmelli — 1717 Collins ave.Miami Beach,Fla.
c. Sidney Zagac — 730 83rd.St.Miami Beach,Fla.
d.

6. Edward J. Mirmelli (Resident Agent Name) — 3814 S.Kedzie Ave.Chicago,Ill. (Address)

7. Last meeting of Directors: January 10,1969 (Month - Day - Year)
8. Corporation Active? Yes (Yes or No)
9. If inactive, inactivity began: (Month - Day - Year)
10. If inactive, will corporation begin business in the future? (Yes or No)
11. Date Incorporated: 6/30/1948 (Month - Day - Year)
12. If foreign corporation, Date Qualified in Fla. (Month - Day - Year)

13. Total Authorized Capital Stock:

| (No. of shares with par value) | (Par value each) |
|---|---|
| | $ |
| | $ |
| 50 (No. of shares without par or stated value) | |

14. Outstanding Capital Stock: (issued)

| | (No. of shares with par value) | (Par value each) | (Total value) |
|---|---|---|---|
| (a) | | $ | $ |
| (b) | | | |
| (c) | 11 1/8 (No. of shares without par or stated value) | | 25,000 00 (Total stated value) |
| (d) Total (a) + (b) + (c) | | | $ 25,000 00 (Total value) |

15. Amount of tax Due $ 50 00
16. Less Credit Memo if any $
17. Penalty and Interest (see instructions) $
18. Amount of tax remitted with this return $ 50 00
19. If foreign corporation, give amount of capital employed in Florida: $
20. If foreign corporation, give the number of States in which you do business.

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli
By President or V-President

Attest Lawrence Mirmelli
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me ______ who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 10th day of June 1969.

NOTARY PUBLIC, STATE of FLORIDA at LARGE
MY COMMISSION EXPIRES NOV. 17, 1969
BONDED THROUGH FRED W. DIESTELHORST

Lillian S. Daggett
Signature of Notary Public

NOTARY PUBLIC, STATE of FLORIDA at LARGE
MY COMMISSION EXPIRES NOV. 17, 19
BONDED THROUGH FRED W. DIESTELHORST

(Notary Seal)

FORM FRC 104

Send Original (with Remittance) TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA
Send First copy to Secretary of State, Tallahassee, Florida
SEE INSTRUCTIONS ON BACK OF LAST COPY

ORIGINAL

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida
FLORIDA REVENUE COMMISSION
Tallahassee, Florida

Refer to This Number in All Correspondence — This return is due on July 1

SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

78-11-A-156287 1968
(06/30/48)

JUN 21 68 448661 JU 156287 CK 50.00

1. SEACOMBER HOTEL CORP., (Give exact name of corporation)

2. RESORT HOTEL (General nature of business)

3. 1717 Collins Avenue (Street or Post Office Box of principal place of business) Miami Beach (City) Dade (County) Florida (State)

4. a. Edward J. Mirmelli (Officers-Name) President (Title) 3814 South Kedzie Avenue, Chicago, Ill. (Address)
b. Lawrence Mirmelli Secretary 1717 Collins Avenue, Miami Beach, Fla.
c. Sidney Zajac Vice President 730 - 83rd St., Miami Beach, Fla.
d.

5. a. Edward J. Mirmelli (Directors - Name) (Law requires at least (3) three) 3814 South Kedzie Avenue, Chicago, Ill. (Address)
b. Lawrence Mirmelli 1717 Collins Avenue, Miami Beach, Fla.
c. Sidney Zajac 730 - 83rd St., Miami Beach, Fla.
d.

6. Edward J. Mirmelli (Resident Agent Name) 3814 South Kedzie Avenue, Chicago, Ill. (Address)

7. Last meeting of Directors January 10, 1968 (Month - Day - Year) 8. Corporation Active? Yes (Yes or No) 9. If inactive, inactivity began ______ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? ______ (Yes or No) 11. Date Incorporated 6-30-1948 (Month - Day - Year) 12. If foreign corporation, Date Qualified in Fla. ______ (Month - Day - Year)

13. Total Authorized Capital Stock:

| (No. of shares with par value) | (Par value each) |
|---|---|
| | $ |
| | $ |
| 50 (No. of shares without par or nominal value) | |

14. Outstanding Capital Stock: (Issued)

| | (No. of shares with par value) | (Par value each) | (Total value) |
|---|---|---|---|
| (a) | | $ | $ |
| (b) | | | |
| (c) | 11 1/8 (No. of shares without par or nominal value) | | 25,000.00 (Total actual value) |
| (d) Total (a) + (b) + (c) | | | $ 25,000.00 (Total value) |

15. Amount of tax Due $ 50.00

16. Less Credit Memo if any $

17. Penalty and Interest (see instructions) $

18. Amount of tax remitted with this return $ 50.00

19. If foreign corporation, give amount of capital employed in Florida. $

20. If foreign corporation, give the number of States in which you do business.

21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Edward J. Mirmelli
By President or V-President

Attest: Lawrence Mirmelli
Secretary

STATE OF Florida
COUNTY OF Dade

Personally appeared before me ______ who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 20th day of June, 1968

[signature]
Signature of Notary Taking Acknowledgment

(Notary Seal)

FORM FRC 100

Send Original (with Remittance) TO FLORIDA REVENUE COMMISSION, TALLAHASSEE, FLORIDA
Send First copy to Secretary of State, Tallahassee, Florida
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

ORIGINAL

Dade Charter No. A/ 54287 Miami Beach, 3/10/48

Name Seacomber Hotel Corp. (The)

Address ~~Mr. Irving Kossoff, Pres., 1210 Washington Ave.,~~

~~[illegible] Collins Ave. Miami Beach~~

Dr. E. J. Mirmelli, 3814 S. Kedzie Ave., Chicago, Ill.

| Date | Amount | Years | Date | Amount | Years |
|---|---|---|---|---|---|
| 9-17-49 | 13.05 | 1948-49 | | | |
| 8-17-50 | 25.00 | 1950 | 50 | Com | npv |
| 10-25-51 | 50.00 | 1951 | | | |
| 4-2-54 | 150.00 | 1952-53 | | | |
| 9-8-54 | 75.00 | 1954 | | | |
| 3-25-59 | 375.00 | 1955-56-57-58-59 | | | |
| 7-6-60 | 10.00 | 1960 | | | |
| 9-17-62 | 20.00 | 1961-62 | | | |

RICHARD (DICK) STONE
SECRETARY OF STATE
The Capitol
Tallahassee, Florida 32304

# State of Florida
# Department of State
# ANNUAL REPORT
## for Corporations and Other Entities

ADDRESS CORRECTION
REQUESTED

DATE DUE: JAN. 1, 1973
DATE DELINQUENT: MAR. 1, 1973

Please refer to this number for future correspondence regarding this corporation

154287-78-11 06/30/48
SEACOMBER HOTEL CORP -THE-
DR E J MIRMELLI
3814 S KEDZIE AVE
CHICAGO ILL

80 408

PLEASE TYPE

CHANGE MAILING ADDRESS TO: Zip

1. The Seacomber Hotel Corp. (Exact Corporate Name)

2. 59-6071081 Fed. Emp. I.D. No.

3. 1717 Collins Avenue (Street Address of Principal Office in Fla.) Miami Beach (City) Dade (County) Florida (State) (Zip)

| | (Officers Names) | (Title) | (Street Address) | (City) | (State) |
|---|---|---|---|---|---|
| 4. (a) | Edward J. Mirmelli | President | 3814 S. Kedzie Ave. | Chicago, | Illinois |
| (b) | STuart Mirmelli | Secretary | 7777 S.W. 86th St. | Miami, | Florida |
| (c) | Sidney Zajac | Vice PResident | 730 84rd Street | Miami, | Florida |
| (d) | | | | | |

| | (Directors, Trustees, Managers) | (Street Address) | (City) | (State) |
|---|---|---|---|---|
| 5. (a) | Same as above | | | |
| (b) | | | | |
| (c) | | | | |
| (d) | | | | |

6. (Florida Resident Agent Name) Stuart Mirmelli (Florida Street Address) 7777 S.W. 86th Street (City) Miami, Florida (Zip)

7. General Nature of Business 7011 See page 2

8. Date Formed or Incorporated 6 / 30 / 48 (MO DA YR)

9. If Foreign Corporation, Date Qualified in Florida / / (MO DA YR)

10. Capital Stock (or number and book value of all certificates of interest or participation): SHARES ISSUED

| | Class or Type | Par or Stated Value | Shares Authorized | Number | Book Value |
|---|---|---|---|---|---|
| (a) | | | | | $ |
| (b) | | | | | $ |
| (c) | | | | | |

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined

12. Fiscal close of accounting period 11 / 30 (MO DA)

13. I/WE declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31, 1972 have been paid as required under Chapter 201, Florida Statutes, and I/WE further declare that this report is true and correct.

The Seacomber Hotel Corp. (Corporate Name)

(Corporate Seal)

Attest: Stuart Mirmelli
Secretary or Assistant Secretary

By: Edward J. Mirmelli
President or Vice President

Return Original (with Filing Fee) to DEPARTMENT OF STATE
DRAWER 18
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

READ INSTRUCTIONS ON BACK

FILING FEE PER PROFIT ENTITY $5.00
PER NON-PROFIT ENTITY $2.00

Corp - AR73

FILED
JUL 20 9 03 PM '79
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

006 7/24/79 15.00

LETTER & CUS Sent 7/23/79

REINSTATEMENT FILED 7/20/79

The Seacomber Hotel Corp

INVOLUNTARILY DISSOLVED 7/2/73

| | |
|---|---|
| REINSTATEMENT | 15 |
| CUS | |
| 72 Privilege Tax | 10 |
| 73 Annual Report | 10 |
| 74 Annual Report | 10 |
| 75 Annual Report | 10 |
| 76 Annual Report | 10 |
| 77 Annual Report | 10 |
| 78 Annual Report | 10 |
| 79 Annual Report | 10 |
| TOTAL | 85 |
| Bal. Due | |
| Refund | |

154287

07/20/79

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

# CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1978 → 1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

1313 7/24/79
006 2 20.00 05

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

**1. Name and Address of Corporation Principal Office:**

154297 [redacted]

~~Surfcomber Hotel Corp.~~ /
Seacomber Hotel Corp
c/o Stewart Mirmelli
1680 Michigan Avenue - Suite 804
Miami Beach, Florida 33139

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

**2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.**

Street Address

P.O. Box No.

City

State | Zip Code

**3. Date Incorporated or Qualified To Do Business in Florida:** 1963

**4. Federal Employer Identification Number (FEIN):** 59-0589140

**5. Date of Last Report:** 1973

FILED
JUL 20 8 02 PM '79
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**6. Names and Street Addresses of Each Officer and Director**

Stewart M. Mirmelli/President/1680 Michigan Avenue, Suite 804 Miami Beach, Florida 33139

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|
| Stewart M. Mirmelli | SEC/ Pres | 1680 Michigan Ave - Ste 804 | Miami Beach, Florida 33139 |
| | | | |
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**7. Registered Agent Information**

Name
Stewart Mirmelli, President

Street Address (Do NOT Use P.O. Box Number)
1680 Michigan Avenue - Suite 804

City, State and Zip Code
Miami Beach, Florida 33139

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

**8.** See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

DO NOT WRITE IN THIS SPACE

07/20/79

Typed Name of Signing Officer: Stewart Mirmelli | Title: President | Telephone Number: (305) 673-6105

Signature: Stewart Mirmelli | Date: July 13, 1979

(Form COR 820) Rev. 10/78

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

# CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1977

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

1BHB 7/24/79
006 2 10.00 0S

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

15487

~~Surfcomber Hotel Corp~~
Seacomber Hotel Corp
c/o Stewart Mirmelli
1680 Michigan Avenue - Suite 804
Miami Beach, Florida 33139

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address:

P.O. Box No.

City

State

Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 1963

4. Federal Employer Identification Number (FEIN): 59-0589140

5. Date of Last Report: 1973

FILED
JUL 20 3 PM '79
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. Names and Street Addresses of Each Officer and Director

Stewart Mirmelli/President/1680 Michigan Avenue, Suite 804 Miami Beach, Florida 33139

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|
| Stewart M. Mirmelli | SEC/ Pres | 1680 Michigan Ave - Ste 804 | Miami Beach, Florida 33139 |
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7. Registered Agent Information

Name
Stewart Mirmelli, President

Street Address (Do NOT Use P.O. Box Number)
1680 Michigan Avenue - Suite 804

City, State and Zip Code
Miami Beach, Florida 33139

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

DO NOT WRITE IN THIS SPACE
07/20/79

Typed Name of Signing Officer: Stewart Mirmelli

Title: President

Telephone Number: (305) 673-6105

Signature: Stewart Mirmelli

Date: July 13, 1979

(Form COR 620 Rev. 10/78)

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

DO NOT WRITE IN THIS SPACE

# CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1976

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

006 1313 2 7/24/79 10.00 05

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

15427

~~Surfcomber Hotel Corp.~~
Seacomber Hotel Corp
c/o Stewart Mirmelli
1680 Michigan Avenue - Suite 804
Miami Beach, Florida 33139

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

FILED
JUL 20 9 02 AM '79
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3. Date Incorporated or Qualified To Do Business in Florida: 1963

4. Federal Employer Identification Number (FEIN): 59-0589140

5. Date of Last Report: 197

6. Names and Street Addresses of Each Officer and Director

Stewart Mirmelli/President/1680 Michigan Avenue, Suite 804 Miami Beach, Florida 33139

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|
| Stewart M. Mirmelli | Sec/Pres | 1680 Michigan Ave - Ste 804 | Miami Beach, Florida 33139 |
| | | | |
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7. Registered Agent Information

Name
Stewart Mirmelli, President

Street Address (Do NOT Use P.O. Box Number)
1680 Michigan Avenue - Suite 804

City, State and Zip Code
Miami Beach, Florida 33139

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

G 07/20/79

8. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer: Stewart Mirmelli

Title: President

Telephone Number: (305) 673-6105

Signature: Stewart Mirmelli

Date: July 13, 1979

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

(Form COR 670) Rev. 10/03/78

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

**CORPORATION ANNUAL REPORT**

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1975

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

#813 7/24/79
006 2 10.00 OS

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

154287

~~Seacomber Hotel Corp~~
Seacomber Hotel Corp
c/o Stewart Mirmelli
1680 Michigan Avenue - Suite 804
Miami Beach, Florida 33139

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone Is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

FILED
JUL 26 9 12 AM '79
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3. Date Incorporated or Qualified To Do Business in Florida: 1963

4. Federal Employer Identification Number (FEIN) 59-0589140

5. Date of Last Report: 1975

6. Names and Street Addresses of Each Officer and Director

Stewart Mirmelli/President/1680 Michigan Avenue, Suite 804 Miami Beach, Florida 33139

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|
| Stewart M. Mirmelli | SEC/ Pres | 1680 Michigan Ave - Ste 804 | Miami Beach, Florida 33139 |

7. Registered Agent Information

Name
Stewart Mirmelli, President

Street Address (Do NOT Use P.O. Box Number)
1680 Michigan Avenue - Suite 804

City, State and Zip Code
Miami Beach, Florida 33139

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

8/07/80/79

8. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer: Stewart Mirmelli

Title: President

Telephone Number: (305) 673-6105

Signature: Stewart Mirmelli

Date: July 13, 1979

(Form COR 6201 Rev. 10/78)

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

DO NOT WRITE IN THIS SPACE

# CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1974

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

313 7/24/79
006 2 10.00 DS

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

15437

~~Seacomber Hotel Corp~~
Seacomber Hotel Corp
c/o Stewart Mirmelli
1680 Michigan Avenue - Suite 804
Miami Beach, Florida 33139

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 1963

4. Federal Employer Identification Number (FEIN) 59-0569140

5. Date of Last Report: 1973

6. Names and Street Addresses of Each Officer and Director

Stewart Mirmelli/President/1680 Michigan Avenue, Suite 804 Miami Beach, Florida 33139

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|
| Stewart M. Mirmelli | Pres | 1680 Michigan Ave - Ste 804 | Miami Beach, Florida 33139 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

FILED
JUL 2 9 12 PM '79
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. Registered Agent Information

Name
Stewart Mirmelli, President

Street Address (Do NOT Use P.O. Box Number)
1680 Michigan Avenue - Suite 804

City, State and Zip Code
Miami Beach, Florida 33139

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

8. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

8/20/79

Typed Name of Signing Officer: Stewart Mirmelli

Title: President

Telephone Number: (305) 673-6105

Signature: Stewart Mirmelli

Date: July 13, 1979

Form COR 680 Rev. 10/25/78

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10

DO NOT WRITE IN THIS SPACE

**CORPORATION ANNUAL REPORT**

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1972

006 1313 7/24/79 10.00 05

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

154217

~~Seacomber Hotel Corp~~
Seacomber Hotel Corp
c/o Stewart Mirmelli
1680 Michigan Avenue - Suite 804
Miami Beach, Florida 33139

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 1963

4. Federal Employer Identification Number (FEIN) 59-0589140

5. Date of Last Report: 1973

6. Names and Street Addresses of Each Officer and Director

Stewart Mirmelli/President/1680 Michigan Avenue, Suite 804 Miami Beach, Florida 33139

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|
| Stewart M. Mirmelli | S/C/ Pres | 1680 Michigan Ave - Ste 804 | Miami Beach, Florida 33139 |
| | | | |
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| | | | |
| | | | |

7. Registered Agent Information

Name: Stewart Mirmelli, President

Street Address (Do NOT Use P.O. Box Number): 1680 Michigan Avenue - Suite 804

City, State and Zip Code: Miami Beach, Florida 33139

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

07/20/79

8. See signature restrictions under Instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer: Stewart Mirmelli

Title: President

Telephone Number: (305) 673-6105

Signature: Stewart Mirmelli

Date: July 13, 1979

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10

(Form COR 400 Rev. 4/79)

11/09/90 11:30 COMP INFO SERVICES 222-0393 002

FILE NUMBER THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

DO NOT WRITE IN THIS SPACE

# CORPORATION ANNUAL REPORT 1990

154287

Read Notice and Instructions on Other Side Before Making Entries

**Filing Fee of $35 Required — Make Checks Payable To: Secretary of State**

1. Name and Address of Corporation Principal Office:

THE SEACOMBER HOTEL CORP.
1717 Collins Avenue
Miami Beach, Florida 33139

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21 12/20/90--00015--008

REINSTATEMENT

P.O. Box No. 22 REINSTATEMENT------***175.00

ANNUAL REPORT------***673.75

City and State 23 ======================

TOTAL --------------***848.75

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: June 30, 1948

4. FEI Number: 59-27511021

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| Title | Names of Officers and Directors | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|
| P/D | E. Jay Mirmelli | 1717 Collins Avenue | Miami Beach, FL 33139 |
| S/D | Stewart Mirmelli | 1717 Collins Avenue | Miami Beach, FL 33139 |

REINSTATEMENT 80-90 GA

## REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

E. Jay Mirmelli
1717 Collins Avenue
Miami Beach, FL 33139

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on:

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE [signature] (Registered Agent Accepting Appointment) DATE 11/7/90

10. I 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. I further certify 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, F.S.

Signature [signature]

Date 11/7/90

E. Jay Mirmelli — President

Typed Name of Signing Officer or Director — Title

Telephone Number (305) 532-7715

☒ Should you desire a certificate of status check the box. $5 Additional Fee

DO NOT WRITE IN THIS SPACE

# APPLICATION FOR REINSTATEMENT FOR

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
92 NOV 17 PM 2:17

Read Instructions on Other Side Before Making Entries

Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation DOCUMENT # 154287

THE SEACOMBER HOTEL CORP.
1717 Collins Avenue
Miami Beach FL 33139

If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address

Address 400000045424
-12/03/92--01028--021

City and State ****53.75 ****53.75

Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 6/30/48

4. FEI Number 59-6071081

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and/or Director

| 1 Title | 2 Names of Officers and/or Directors | 3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4 City and State |
|---|---|---|---|
| P/D | JAY MIRMELLI | 1717 Collins Avenue | Miami Beach FL 33139 |
| S/D | STEWART MIRMELLI | 1717 Collins Avenue | Miami Beach FL 33139 |
| | | | -12/03/92--01028--021 ****53.75 ****53.75 |
| | | | |
| | | | |

This corporation has liability for intangible tax under section 199.032, Florida Statutes. ☐ Yes ☒ No
For intangible tax information call Department of Revenue 904-488-6800.

## REGISTERED AGENT INFORMATION

6. Name and Address of Current Registered Agent

JAY MIRMELLI
1717 Collins Avenue
Miami Beach FL 33139

7. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

Street Address (Do NOT Use P.O. Box Number)

City and State FL. Zip Code

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505, F.S.

Signature of Registered Agent JAY MIRMELLI REGISTERED AGENT MUST SIGN Date 11/10/92

9. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Officer or Director Pres. Date 11/10/92 Phone # (305)532-7715

Typed or printed name of signing officer or director JAY MIRMELLI, President and Director

10. Should you desire a certificate of status check the box CERTIFICATE OF STATUS DESIRED ☒

$8.75 Additional Fee required for a Certificate of Status

File Now. Filing Fee after May 1 is $225.00

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation: DOCUMENT # 154287 (7)

THE SEACOMBER HOTEL CORP.
1717 COLLINS AVE
MIAMI BEACH FL 33139-2008

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/30/1948

3a. Date of Last Report: 11/17/1992

4. FEI Number: 596071081 — Applied For / Not Applicable

FILING FEE $200.00 — ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE — MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

2. Mailing Address — 21 / Suite, Apt. #, etc. 22 / City & State 23 / Zip 24 / Country 25

2a. Principal Place of Business — 26 / Suite, Apt. #, etc. 27 / City & State 28 / Zip 29 / Country 30

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

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $138.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MIRMELLI, E. JAY
1717 COLLINS AVENUE
MIAMI BEACH FL 33139

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
86 Country

11. Pursuant to the provisions of Sections 607.1622 and 607.1508 or Sections 617.1622 and 617.1508, Florida Statutes, the below 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | P/D<br>MIRMELLI, E. JAY<br>1717 COLLINS AVENUE<br>MIAMI BEACH FL |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | S/D<br>MIRMELLI, STEWART<br>1717 COLLINS AVENUE<br>MIAMI BEACH FL |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |

13. OFFICERS AND DIRECTORS CHANGES

| | |
|---|---|
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |
| TITLE / NAME / ADDRESS / CITY-ST-ZIP | |

14. [illegible]

SIGNATURE

Typed or Printed Name of Signing Officer or Director — Title — Daytime Telephone Number ( )

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 19, 1994.**
**AMOUNT DUE ON OR BEFORE 8/19/94: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)**

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
94 JUL 19 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 154287 (7)

1. Corporation Name
THE SEACOMBER HOTEL CORP.

Mailing Address
1717 COLLINS AVENUE
MIAMI BEACH FL 33139

Principal Place of Business
1717 COLLINS AVENUE
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/30/1948
3a. Date of Last Report: 04/21/1993
4. FEI Number: 59-6071081 — 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. Mailing Address
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Principal Place of Business
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent
MIRMELLI, E. JAY
1717 COLLINS AVENUE
MIAMI BEACH FL 33139

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 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE ____________________

| 12. OFFICERS AND DIRECTORS | | 13. CHANGES TO OFFICERS AND DIRECTORS | |
|---|---|---|---|
| 11 TITLE | P/D | 11 TITLE | |
| 12 NAME | MIRMELLI, E. JAY | 12 NAME | |
| 13 STREET ADDRESS | 1717 COLLINS AVENUE | 13 STREET ADDRESS | |
| 14 CITY-ST-ZIP | MIAMI BEACH FL | 14 CITY-ST-ZIP | |
| 21 TITLE | S/D | 21 TITLE | |
| 22 NAME | MIRMELLI, STEWART | 22 NAME | |
| 23 STREET ADDRESS | 1717 COLLINS AVENUE | 23 STREET ADDRESS | |
| 24 CITY-ST-ZIP | MIAMI BEACH FL | 24 CITY-ST-ZIP | |
| 31 TITLE | | 31 TITLE | |
| 32 NAME | | 32 NAME | |
| 33 STREET ADDRESS | | 33 STREET ADDRESS | |
| 34 CITY-ST-ZIP | | 34 CITY-ST-ZIP | |
| 41 TITLE | | 41 TITLE | |
| 42 NAME | | 42 NAME | |
| 43 STREET ADDRESS | | 43 STREET ADDRESS | |
| 44 CITY-ST-ZIP | | 44 CITY-ST-ZIP | |
| 51 TITLE | | 51 TITLE | |
| 52 NAME | | 52 NAME | |
| 53 STREET ADDRESS | | 53 STREET ADDRESS | |
| 54 CITY-ST-ZIP | | 54 CITY-ST-ZIP | |
| 61 TITLE | | 61 TITLE | |
| 62 NAME | | 62 NAME | |
| 63 STREET ADDRESS | | 63 STREET ADDRESS | |
| 64 CITY-ST-ZIP | | 64 CITY-ST-ZIP | |

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 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ____________________ 7-13-94 305-532-7715
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 24 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 154287 (7)

1. Corporation Name
THE SEACOMBER HOTEL CORP.

Principal Place of Business
1717 COLLINS AVENUE
MIAMI BEACH FL 33139

Mailing Address
1717 COLLINS AVENUE
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

| | |
|---|---|
| 2. Principal Place of Business 21 | 2a. Mailing Address 26 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 | City & State 28 |
| Zip 24 / Country 25 | Zip 29 / Country 30 |

3. Date Incorporated or Qualified: 06/30/1948
3a. Date of Last Report: 07/19/1994
4. FEI Number: 59-6071081 ☐ 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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
MIRMELLI, E. JAY
1717 COLLINS AVENUE
MIAMI BEACH FL 33139

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 ______ DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
|---|---|---|
| TITLE | PD | 1.1 TITLE ☐ Change ☐ Addition |
| NAME | MIRMELLI, E. JAY | 1.2 NAME |
| STREET ADDRESS | 1717 COLLINS AVENUE | 1.3 STREET ADDRESS |
| CITY-ST-ZIP | MIAMI BEACH FL | 1.4 CITY-ST-ZIP |
| TITLE | SD | 2.1 TITLE ☐ Change ☐ Addition |
| NAME | MIRMELLI, STEWART | 2.2 NAME |
| STREET ADDRESS | 1717 COLLINS AVENUE | 2.3 STREET ADDRESS |
| CITY-ST-ZIP | MIAMI BEACH FL | 2.4 CITY-ST-ZIP |
| TITLE | | 3.1 TITLE ☐ Change ☐ Addition |
| NAME | | 3.2 NAME |
| STREET ADDRESS | | 3.3 STREET ADDRESS |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP |
| TITLE | | 4.1 TITLE ☐ Change ☐ Addition |
| NAME | | 4.2 NAME |
| STREET ADDRESS | | 4.3 STREET ADDRESS |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP |
| TITLE | | 5.1 TITLE ☐ Change ☐ Addition |
| NAME | | 5.2 NAME |
| STREET ADDRESS | | 5.3 STREET ADDRESS |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP |
| TITLE | | 6.1 TITLE ☐ Change ☐ Addition |
| NAME | | 6.2 NAME |
| STREET ADDRESS | | 6.3 STREET ADDRESS |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP |

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 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 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 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone