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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 27 1997 8:00am

Secretary of State

05 JAN 96

Daytime Phone #

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 448699

(9)

REGISTERED AGENT CORPORATION

| | | | | | } | 418K BIBII BIBII B | | |
|-------------------------------|--|--|---------------------------------|-------------------|---|---------------------|-------------------|-------------------------|
| Principal Place | | Mailing Address | | | | | | |
| 1665 SOUTH B MIAMI FL 3313 | | 1665 SOUTH BAYSHORE DR MIAMI FL 33133-4213 | | | | | | |
| | | | | | 3. Date Incorporated or Qualified 05/15/1974 | 3a. Date of 04/16/1 | | porl |
| 2. Principat PI | ace of Business | 2a. Mailing Address | | | 4. FEI Number 59-1529314 | | } | olied For Applicable |
| Suite, Apt | #, etc | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | 1 1 7 | 8.75 A | |
| City & State | > | City & State | | | 6. Election Campaign Financing | | 5.00 | |
| 23 | | 28 | T 0 | | Trust Fund Contribution | | Added to | |
| Zip 24 | Country 25 | Zip 29 | Country 30 | | | Yes 🔲 No | 0 | 199.032, |
| | g. Name and Address of Current | Registered Agent | | | 10. Name and Address of New Reg | listered Agen | it | |
| | omon, warren m | | 81 | Name | • | | | |
| 1665 | 5 S BAYSHORE DR | | 82 | Street Add | ress (P.O. Box Number is Not Acceptab | le) | | |
| MIAI | MI FL 33133 | | 83 | | | | | |
| | | | 63 | | | | | |
| | | | 84 | City | | FL 85 | Zip C | ode |
| A. D | Is the same is long of Continue COZ OFOC | and 607 1500. Elected Statut | on the chave | nomad cor | poration submits this statement for the p | | naina its | registered |
| office or re agent I ar | egistered agent, or both, in the State in familiar with, and accept the obligation | of Florida, Such change was a tions of, Section 607,0505, Flo | authorized by orida Statutes | the corpora | tion's board of directors. I hereby accep | t the appointm | nent as r | egistered |
| SIGNATURE | | | | | | | | |
| CIOITO II | Signature, typed or printed name of registered agen | | | upen erulangia In | ired when reinstating) | DATE | | |
| 12. | OFFICERS AND | | 13. | т- | ADDITIONS/CHANGES TO OFFIC | | RECTORS Change | S IN 12 Addition |
| TITLE | PS CALOMON WARDEN M | ☐ DELETE | 1.1 TITLE | | | ۱ لـــا | PHAIRE | L' Amortion |
| NAME | SALOMON, WARREN M. | | 1.2 NAME | | | | | |
| STREET ADDRESS | 1665 SOUTH BAYSHORE DR | | 1.3 STREET | 1 | | | | |
| CITY-ST-2IF | MIAMI FL | DELETE | 14 CITY - S | T-24P | | | Change | Addition |
| 1:1LE | TD | ☐ beceig | 2.1 TITLE | | | <u>.</u> | Ulkilige | L.J Addition |
| NAME | SALOMON, WARREN M. 1665 S BAYSHORE DR | | 2.2 NAME | 1000000 | | | | |
| STREET ADDRESS | MIAMI FL | | 2.3 STREET 2.4 CITY-5 | 1 | | | | |
| DITY: ST: 7/P THEF | MIMMITE | DELETE DELETE | | 01-217 | | — П | Change | Addition |
| NAME | | house of the term of the | 3.1 TITLE 3.2 NAME | | | | | |
| STREET ADDRESS | | | 3.3 STREET | ADDRESS | | | | |
| CHY-SI-769 | | | 3.4 CITY-5 | | | | | |
| THE | | DELETE | 4.1 TITLE | | | | Change | Addition |
| NAME | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | | | | |
| CITY - ST - ZIP | | | 4.4 CITY-S | | | | | |
| TITLE | | ☐ OELETE | 5.1 TITLE | | | | Change | Addition |
| NAME | | | 5.2 NAME | i | | | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | | |
| CITY - S1 - 7IP | | | 5.4 CITY - S | 1 - ZIP | | | | |
| TILLE | 1 1 1 A P - 21 A B A B A B A B A B A B A B A B A B A | ☐ DELETE | 6.1 TITLE | | | | Change | Addition |
| NAM: | | | 62 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | | |
| CITY - SY - ZIP | ************************************** | | 6.4 CITY - S | | | | | 5 |
| l informatic | on indicated on this annual report or s | unnlemental annual report is : | true and accu | irate and tha | nd in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega | i effect as if m | rade und | ter oath: that: |
| l am an o | fficer or director of the corporation or n Block 12 or Block /3 if changed or | the receiver or trustee empoy you attachment with an ad | vered to execute | cute this repo | ort as required by Chapter 607, Florida S | tatutes; and th | nat my na | ame |
| | / / / / / | 1 1 1 Ac. | | | | | | |

WARLOW M SALOMON