2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2000 8:00 am
Secretary of State
04-14-2000 90013 039 ***150.00

DOCUMENT # 491052

1. Entity Name
FORTE PROPERTIES, INC.

Principal Place of Business	Mailing Address
1000 WEST AVENUE MIAMI BEACH FL 33139	1000 WEST AVENUE MIAMI BEACH FL 33139-4759

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3191 Coral Way	3191 Coral Way
Suite, Apt. #, etc. Ste 300	Suite, Apt. #, etc. Ste 300
City & State Miami, Florida	City & State Miami, Florida
Zip 33145 Country USA	Zip 33145 Country USA

4. FEI Number 59-1724850 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FORTE,JOHN
1000 WEST AVENUE
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name FORTE, JOHN
Street Address (P.O. Box Number is Not Acceptable) 3191 CORAL WAY, STE. 300
City MIAMI FL Zip Code 33145

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE [signature] JOHN FORTE 4/07/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FORTE, JOHN 1000 WEST AVENUE MIAMI BEACH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FORTE, JOHN 3191 CORAL WAY, STE300 MIAMI, FL.	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RESTREPO, MARIA 1000 WEST AVENUE MIAMI BEACH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RESTREPO, MARIA 3191 CORAL WAY, STE 300 MIAMI, FL.	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Pres. 4/07/00 (305) 445-5571
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #