## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 542501 1. Corporation Name

FRC INVESTMENTS, INC.

Principal Place of Business

Mailing Address

LEGAL DEPT 9TH FLOOR

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90051 008 \*\*\*158.75



2601 S. BAYSHORE DRIVE MIAMI FL 33131-5461		2601 S. BAYSHORE DRIVE MIAMI FL 33131-5461			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  07/29/1977		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For	
21		26	6		59-1756844	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5 Contiferate of Status Desired \$8.	75 Additional	
22		27			5. Certificate of Status Desired Fee Required		
City & State		City & State				.00 May Be	
23		28	<u> </u>		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year Intangible		
24	25	29	30		Personal Property Tax.	s □No	
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Registered Agent		
COL	DMAN JOEL K			oi Name			
	DMAN, JOEL K AL DEPT., 9TH FLOOR		82 Street Add		Address (P.O. Box Number is Not Acceptable)		
	S. BAYSHORE DRIVE			83			
	.S. DATSHURE DRIVE AI FL 3313-5461			03		ł	
MAIM	MINIMI LE 2012-2-401			84 City	85	Zip Code	
					corporation submits this statement for the purpose of changing	- itiotorod	
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Flo	nda Statu	ites.	oration's board of directors. I hereby accept the appointment		
12.	OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12	
TITLE	DP	☐ DELETE 1.11		 Œ		ange 🔲 Addition	
NAME	JEFFREY, THOMAS W.	1.2 N		ME			
STREET ADDRESS	2601 S. BAYSHORE DRIVE		1.3 ST	REET ADDRESS		]	
CITY-ST-ZIP	MIAMI FL		1.4 CIT	Y-ST-ZIP			
TITLE			2.1 TIT		□ Ch	ange 🔲 Addition	
NAME			2.2 NA	ME			
STREET ADDRESS	2601 S. BAYSHORE DRIVE		2.3 ST	REET ADDRESS		ļ	
CITY-ST-ZIP	T3.13.15_T111.5 15 15 15		2. 4 CI	TY-ST-ZIP			
TITLE			3.1 TIT	LΕ	Ch	ange 🗌 Addition	
NAME	FISCHER, JOHN H.		3.2 NA	ME			
STREET ADDRESS	2601 S. BAYSHORE DRIVE		3.3 ST	REET ADDRESS			
CITY-ST-ZIP	MIAMI FL		3.4. CI	TY+ST-ZIP			
TITLE	VDCS	☐ DELETE	4.1 TiT	LE	V/D/C/AS 🟋Ch	ange	
NAME	COOK, PAULA		4. 2 N	ME	2601 S. Bayshore Drive		
STREET ADDRESS	2601 S. BAYSHORE DRIVE		4.3 ST	REET ADDRESS	Miami FL 33133		
CITY-ST-ZIP	MIAMI FL 33133			ry-st-zip			
TITLE	VSD	☐ DELETE	5.1 TIT		. □Ch	ange 🗌 Addition	
NAME	GOLDMAN, JOEL K.		5.2 NA				
STREET ADDRESS	2301 S BAYSHORE DR			REET ADDRESS			
CITY-ST-ZIP	MIAMI_FL			Y-ST-ZIP			
TITLE	V	☐ DELETE	6.1 TIT		□ Ch	ange	
NAME	LAGUARDIA, JOHN		6.2 NA		•		
STREET ADDRESS	2601 S. BAYSHORE DR		6.3 ST	REET ADDRESS			
CITY-ST-7IP	MIAMI FI 33133		6.4 CI	TY-ST-ZIP			

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

305-859.4000