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

**PROFIT** CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 624438

(8)

CHATEAUBLEAU INN ONE, INC.

UTATE	AUDLEAU INN UNE, INC.									
Principal Pla	ce of Business	Mailing Address	ailing Address			I LOBERTA DELINE FLORE BEDEL ANDER ANDER FORM DEBLE DELINE BEDEL BEDEL BEDEL BEDEL BEDEL				
4000 ALTON I MIAMI BEACH US		4000 ALTON ROAD MIAMI BEACH FL 331404	4000 ALTON ROAD MIAMI BEACH FL 33140-3854							
						3. Date incorporated or Qualified 06/26/1979	or Qualified Sa. Date of Last Report 01/23/1996			
21	Place of Business	2a. Mailing Address 26	h			4, FEI Number 59-1971591	Applied For Not Applicable			
Suite, Apt		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	S8.75 Additional Fee Required			
Oity & Sta	ite	City & State	<del></del>			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 	Country	Zip	Coun	try		8. This corporation has liability for intangible tax under s. 199 032,				
24 25 29 30 30 2 Name and Address of Current Registered Agent				<u> </u>		Florida Statutes				
						10, Name and Address of New Hegistered Agent				
VOUTSINAS, SPIROS				91   1	Vame					-
4000 ALTON ROAD			Ţ	82 Street Ar		ddress (P.O. Box Number is Not Acceptable)				
MIAMI BEACH FL 33140			ļ.,	83						
			1	53						}
			1		City		FL		Zip Code	
11. Pursuant office or agent 1.	to the provisions of Sections 607.0 registered agent, or both, in the Sta ani familiar with, and accept the ob-	0502 and 607.1508, Florida Statuate of Florida Such change was oligations of, Section 607.0505, F	utes, the abo authorized Torida Statu	ove-n by th ites.	amed corpo e corporation	oration submits this statement for the pu on's board of directors. I hereby accept	rpose of the appo	chang Intme	ing its registe nt as registere	red id
SIGNATURE	Constitution of the control of the c	August and July if annalysis August A	YC Besistered	A		d when reinstating)	DATE	~ <u>-</u>		_
Signative: typed or partied name of registered agent and tide if applicable (NOTE Regist 12. OFFICERS AND DIRECTORS 1					agina:cre regula	ADDITIONS/CHANGES TO OFFICE		DIREC	TORS IN 12	
Tillif	DP	DELETE		1.1 TITLE		ADDITIONS OF INTEREST OF STATES		Cha		ition
NAME	VOUTSINAS, TASSOS		1.2 NAN	VE.				_		- {:
STREET ADDRESS	0005 000 7 07			1.3 STREET ADDRESS						- {}
CHY - \$5 - 20F	DOGA PATON PI			1.4 CITY-ST-7IP						
TITLE	DV	☐ DELETE	2.1 TITL					Cha	inge Add	ition
NAME	VOUTSINAS, SPIROS		2.2 NAA	WE	- 1					j
STREET ADDRESS	4000 ALTON ROAD		2.3 STR	EET ADI	DRESS					{

**FILED** 

Mar 18 1997 8:00am

Secretary of State

**BOCA RATON FL** 1.4 DITY-ST-ZIP CHY-\$1-78 DELETE Tille 2.1 TITLE **VOUTSINAS, SPIROS** 22 NAME NAME 4000 ALTON ROAD STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL CITY - ST - ZIP 2 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE ☐ Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS City - ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE THE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SI-ZiP 4.4 CITY - ST-ZIP DELETE Change Addition THILE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS City St-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition THE 6.1 TITLE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - Zie 6.4 CITY - ST - ZIP

14. I do 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 composition or the Section of trustee efficiency of trustee efficiency of the execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this annual report or supple I am an officer or director of the perporation or the appears in Block 12 or Block 13 if changed, or har

SIGNATURE

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