

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Candice B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 632776 (1)

1. Corporation Name

FIRST CITY DEVELOPMENTS OF FLORIDA, INC.

Principal Place of Business

Mailing Address

767 3RD AVE
34TH FLOOR
NEW YORK NY 10017
US

767 3RD AVE
34TH FLOOR
NEW YORK NY 10017
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 City

28 City

24 State

29 State

25 Country

30 Country

3. Date Incorporated or Qualified

08/14/1979

3a. Date of Last Report

03/25/1994

4. FEI Number

95-3602747

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

10. Name and Address of New Registered Agent

STRICKROOT JOHN C.
THE COURTHOUSE CENTER BUILDING
15TH FLOOR 175 NW FIRST AVE.
MIAMI FL 33128

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 City

84 State

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	CRUM, JOHN
STREET ADDRESS	767 3RD AVE, 34TH FLOOR
CITY, STATE, ZIP	NEW YORK NY
NAME	ROBBINS, SCOTT D
STREET ADDRESS	767 3RD AVE, 34TH FLOOR
CITY, STATE, ZIP	NEW YORK NY
NAME	GUZMAN, VIVIANNA
STREET ADDRESS	767 3RD AVE, 34TH FLOOR
CITY, STATE, ZIP	NEW YORK NY
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	

1. NAME	P/DIC	☒ Change ☐ Addition
2. NAME	Combemale, Nicolas W	
3. STREET ADDRESS		
4. CITY, STATE, ZIP		
5. NAME		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY, STATE, ZIP		
9. NAME		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, STATE, ZIP		
13. NAME		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, STATE, ZIP		
17. NAME		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, STATE, ZIP		

14. I hereby certify that the information supplied with this form is substantially true and does not qualify for the exemption stated in Sections 199.032 and 199.033, Florida Statutes. I further certify that the information is true and correct, and that my signature shall have the same legal effect as if made under oath. I am familiar with and accept the obligations of Section 607.0605, Florida Statutes, and that my name appears on the list of officers and directors of the corporation.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95