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

FILED Feb 18 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name 693701 (5) EMMA N. BRONSTEIN. INC. Principal Place of Business Mailing Address 750 SW 10TH AVE 750 SW 10TH AVE MIAMI FL 33130 MIAMI FL 33130 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/09/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2103761 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Ζιp Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 25 24 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROCA, CELSO M. 1000 SW 23RD RD Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33129** 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 a diaccept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE nt and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE ☐ Change Addition TITLE ROCA, CELSO M. 1.2 NAME NAME 1000 SW 23RD RD 1.3 STREET ADDRESS STREET ADORESS MIAM FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change 3.1 TITLE Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change Addition TOTLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

CITY - 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 apachment with an address.

SIGNATURE.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

61 TITLE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

DELETE

G051854-6860

Change

Addition

CR2E034