## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT** #

(6)

## SEACOAST CONDOMINIUM, INC.

**FILED** Mar 26 1998 8:00am Secretary of State



2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. S. Certificate of Status Desired	Principal Place										
2740 WEST 5TH AVE. HALEAH FL 33010  2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 3. Certificate of Status Desired Desired Status Desired Desired Status Desired Desired Status Desired Desired Status Desired Status Desired Status Desired Desired Status Desired Status Desired Desired Desired Status Desired Desired Status Desired Desired Desired Desired Status Desired	Principal Place of Business Malling Address								l 188101 (838) itoli 1888 1118 itoli 81		IJBIY BUBYI HEBI
### HALEAH FL 33010 ### A. FEI Number   Applied Fr   S9-1763749   Not Applied Fr   S9-1763749   Not Applied Fr   S9-1763749   Set   Set   Suite, Apt. #, etc.   Suite, Apt. #, etc							ľ	3. Date Incorporated or Qualified			
2. Principal Piace of Business											
2. Mailing Address 2. Mailing Address 2. Mailing Address 2. Mailing Address 2. Suite, Apt. #, etc. 3. Suite, Apt.	CONTRACTOR CO. WA										Applied For
Sulte, Apt. #, etc.  Sulte, Ap									59-1763749		lot Applicable
Suite, Apt. #, etc.    Suite, Apt. #, etc.	<del></del>			———				5. Certificate of Status Desired			
Trust Fund Contribution Added to Fees  City & State  City & State  Zip  Country  S. This corporation owes or has paid the current year intengible Personal Property Tax due June 30.  Yes  No  SCHENK, HAROLD  WOODS MANAGEMENT CORPORATION OF FLORIDA  2740 WEST 5 AVE.  HALEAH FL 33010  31 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 register signature required when remaking)  DATE  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as register signature required when remaking)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  ST				·							
City & State    28	<del></del>			k——							
28   28   29   20   20   20   20   20   20   20											
Zip Country Zip Country Zip Country Begintered Agent Porsonal Property Tax due June 30.    Yes   No Personal Property Tax due June 30.    Yes   No No Personal Property Tax due June 30.    Yes   No	<del></del>			_ <del>  </del> ′							
SCHENK, HAROLD WOODS MANAGEMENT CORPORATION OF FLORIDA 2740 WEST 5 AVE. HALEAH FL 33010  10. Name and Address of New Registered Agent  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent eignature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 In TITLE  ST DELETE  11. TITLE  ST DELETE  12. MAKE  SWIFT, DOLORES  SP217 ABBOTT AVE.  13. STREET ADDRESS  8217 ABBOTT AVE.  14. CITY-ST-ZIP  MIAMI BEACH FL  30. CHUBATY, WALTER  SIREET ADDRESS  8215 ALBOTT AVE., \$4A  22. STREET ADDRESS  8215 ALBOTT AVE., \$4A  23. STREET ADDRESS  8215 ALBOTT AVE., \$4A  23. STREET ADDRESS  8215 ALBOTT AVE., \$4A  23. STREET ADDRESS  8217 ABBOTT AVE., \$4A  24. CITY-ST-ZIP  MIAMI BEACH FL  33. STREET ADDRESS  8217 ABBOTT AVE., \$4A  24. CITY-ST-ZIP  MIAMI BEACH FL  33. STREET ADDRESS  8217 ABBOTT AVE., \$4A  24. CITY-ST-ZIP  MIAMI BEACH FL  33. STREET ADDRESS  8217 ABBOTT AVE., \$4A  33. STREET ADDRESS  8218 ABBOTT AVE., \$4A  33. STREET ADDRESS  8219 ABBOTT AVE., \$4A  33. STREET ADDRESS  8217 ABBOTT AVE., \$4A  33. STREET ADDRESS  8218 ABBOTT AVE., \$4A  33. STREET ADDRESS  8219 ABBOTT AVE., \$4D  Change			Country	Zip		Counti	у		8. This corporation owes or has paid	d the current year Ir	ntangible
SCHENK, HAROLD WOODS MANAGEMENT CORPORATION OF FLORIDA 2740 WEST 5 AVE. HIALEAH FL 33010  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the appointment as register agent. I am familiar with, and accept the obligations of, Sections 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Sections 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the appointment as register agent. I am familiar with, and accept the appointment as register agent. In the corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the above-named corporation submits this statement for the purpose of changing its register agent. In the corporation submits this statement for the purpose of changing its register agent. In the corporation submits this statement for the purpose of changing its register agent. In the corporation submits this statement for the purpose of changing	:4					30					Z No
SCHENK, HAROLD WOODS MANAGEMENT CORPORATION OF FLORIDA 2740 WEST 5 AVE. HIALEAH FL 33010  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 register agent, i am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent, i am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent, i am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent, i am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent, i am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent, in am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporat		9. Name	and Address of Currer	nt Registered Agent	t				10. Name and Address of New Reg	gistered Agent	
WOODS MANAGEMENT CORPORATION OF FLORIDA 2740 WEST 5 AVE. HIALEAH FL, 33010  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature. typed or printed name oil registered agent and tile il applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITITLE  ST  NAME  SWIFT, DOLORES  8217 ABBOTT AVE.  1.3 STREET ADDRESS  8217 ABBOTT AVE.  1.4 CITY-ST-2IP  MIAMI BEACH FL  1.4 CITY-ST-2IP  MIAMI BEACH FL  1.4 CITY-ST-2IP  MIAMI BEACH FL  1.5 TITLE  D Change Add  22 NAME  22 NAME  23 STREET ADDRESS  8217 ABBOTT AVE.  1.5 TITLE  D Change Add  Add  Change Add  Add  Change  Add  Change  Add  City  FL  85 Zip Code  1.5 TITLE  D Change  Add  Change  Change  Add  Change  Add  Change						8.	I Name	)			
2740 WEST 5 AVE. HIALEAH FL 33010  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11.1 ITILE  ST  DELETE  1.1 ITILE  SWIFT, DOLORES  SWIFT, DOLORES  STREET ADDRESS  8217 ABBOTT AVE., ATT  TITLE  D  CHUBATY, WALTER  SIREET ADDRESS  8215 ALBOTT AVE., 44A  CITY-ST-2IP  MIAMI BEACH FL  DELETE  1.1 ITILE  D  CHUBATY, WALTER  SIREET ADDRESS  8215 ALBOTT AVE., 44A  23 STREET ADDRESS  8217 ABBOTT AVE., 44A  23 STREET ADDRESS  8217 ABBOTT AVE., 44A  24 City ST-2IP  MIAMI BEACH FL  D  Change  Add  Chubaty, WALTER  SIREET ADDRESS  8217 ABBOTT AVE., 44A  23 STREET ADDRESS  8217 ABBOTT AVE., 44A  24 City-ST-2IP  MIAMI BEACH FL  D  Change  Add  Chubaty, WALTER  SIREET ADDRESS  8217 ABBOTT AVE., 44A  23 STREET ADDRESS  8217 ABBOTT AVE., 44A  24 City-ST-2IP  MIAMI BEACH FL  Change  Add  STREET ADDRESS  8217 ABBOTT AVE., 44A  23 STREET ADDRESS  8217 ABBOTT AVE., 44A  24 City-ST-2IP  MIAMI BEACH FL  Change  Add  STREET ADDRESS  8217 ABBOTT AVE., 44A  32 STREET ADDRESS  8217 ABBOTT AVE., 44A  33 STREET ADDRESS  8217 ABBOTT AVE., 44A  34 STREET ADDRESS  8217 ABBOTT AVE., 44A  35 STREET ADDRESS  8217 ABBOTT AVE., 44A  37 STREET ADDRESS  8217 ABBOTT AVE., 44A  38 STREET ADDRESS  82 STREET ADDRESS  83 STREET ADDRESS  83 STREET ADDRESS  8460 SW 102 CT	SCHENK, HAROLD						Street	Address (P.O. Box Number is Not Acceptable)			
HALEAH FL 33010  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  ST  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  ST  OFFICERS AND DIRECTORS IN 12  DELETE  1.1 ITILE  DELETE  1.1 ITILE  DELETE  1.2 NAME  SWIFT, DOLORES  8217 ABBOTT AVE., ATT 9  Change  AND  CHUBATY, WALTER  SIREET ADDRESS  8217 ABBOTT AVE., ATT 9  Change  Add  CHUBATY, WALTER  SIREET ADDRESS  8215 ALBOTT AVE., ATA  22 NAME  23 SIREET ADDRESS  8217 ABBOTT AVE., ATA  24 NAME  CHUBATY, WALTER  SIREET ADDRESS  8217 ABBOTT AVE., ATA  23 SIREET ADDRESS  8217 ABBOTT AVE., ATA  24 CITY-ST-ZIP  MIAMI BEACH FL  3. ITITLE  DELETE				OF FLORIDA			<u>.</u>				
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SIGNATURE  Signature. typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  ST SWIFT, DOLORES  STREET ADDRESS  8217 ABBOTT AVE.  CITY-ST-ZIP  MIAMI BEACH FL  1.4 CITY-ST-ZIP  MIAMI BEACH FL  STREET ADDRESS  8215 ALBOTT AVE., #4A  CITY-ST-ZIP  MIAMI BEACH FL  STREET ADDRESS  8215 ALBOTT AVE., #4A  CITY-ST-ZIP  MIAMI BEACH FL  STREET ADDRESS  8216 ALBOTT AVE., #4A  CITY-ST-ZIP  MIAMI BEACH FL  STREET ADDRESS  8217 ABBOTT AVE.NUE. APT 8  CITY-ST-ZIP  MIAMI BEACH FL  STREET ADDRESS  8217 ABBOTT AVE.NUE. APT 8  CITY-ST-ZIP  MIAMI BEACH FL  331447  STREET ADDRESS  STREET ADDRESS  8217 ABBOTT AVE.NUE. APT 8  STREET ADDRESS  8217 ABBOTT AVE.NUE. APT 8  STREET ADDRESS  STREET ADDRESS  8217 ABBOTT AVE.NUE. APT 8  STREET ADDRESS  8217 ABBOTT AVE.NUE. APT 8  STREET ADDRESS  STREET ADDRESS  8217 ABBOTT AVE.NUE. APT 8	office or re agent, I as	to <b>the</b> provisi e <b>giste</b> red ag m <b>fa</b> miliar wit	ons of Sections 617.050 ent, or both, in the State th, and accept the oblig	J2 and 617.1508, Floi of Florida. Such cha ations of, Section 61	rida Statute ange was at 7.0503, Flor	s, the abor uthorized t rida Statute	ve-named by the cores.	rporation	ation submits this statement for the purish board of directors. I hereby accept	urpose of changing If the appointment a	s registered
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  ST SWIFT, DOLORES STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAME CHUBATY, WALTER STREET ADDRESS											
TITLE ST DELETE 1.1 TITLE PD AND RESERVED AN		Signature, typed			(NOTE:	-	gent signatur	e required v			
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STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL  TITLE  NAME CHUBATY, WALTER STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL  CHUBATY, WALTER STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL  TITLE  PD  DELETE  1.3 STREET ADDRESS 82/7 ABBOTT AVE., 44  2.1 TITLE STD Change Address SPIONER, HALINA 2.3 STREET ADDRESS SPIONER, HALINA 2.3 STREET ADDRESS SPIONER, HALINA 2.4 CITY-ST-ZIP MIAMI BEACH FL  TITLE  PD  DELETE  3.1 TITLE  NAME FERNANDEZ, OSMARA STREET ADDRESS SPIONER, HALINA 3.3 STREET ADDRESS SPIONER, HALINA 3.4 CITY-ST-ZIP MIAMI BEACH FL  3.4 CITY-ST-ZIP MIAMI BEACH FL  3.5 TRIET ADDRESS SPIONER, HALINA STREET ADDRESS SPIONER		4-			/			T	AUDITIONS/CHANGES TO OFFICE		
CITY-ST-ZIP MIAMI BEACH FL  D  CHUBATY, WALTER  STREET ADDRESS  CITY-ST-ZIP  MIAMI BEACH FL  CHUBATY, WALTER  STREET ADDRESS  S215 ALBOTT AVE., #4A  CITY-ST-ZIP  MIAMI BEACH FL  DELETE  1.4 CITY-ST-ZIP  2.1 TITLE  STD  Change  AND  CITY-ST-ZIP  MIAMI BEACH FL  DELETE  3.3 STREET ADDRESS  3.1 TITLE  PD  Change  Address  STREET ADDRESS  S217 ABBOTT AVEAUE APT 8  STREET ADDRESS  S217 ABBOTT AVEAUE APT 8  STREET ADDRESS  S218 ABBOTT AVEAUE APT 8		• .			DELETE	1.1 TITLE					
TITLE D CHUBATY, WALTER  STREET ADDRESS 8215 ALBOTT AVE., #4A  CITY-ST-ZIP MIAMI BEACH FL  TITLE PD CHANGE  NAME FERNANDEZ, OSMARA  STREET ADDRESS 2.1 TITLE STD CHANGE ADDRESS 82.1 TABBOTT AVEXUE APTHOR ADDRESS 82.1 TABBOTT AVEXUE APTHOR ADDRESS 82.1 TABBOTT AVEXUE APTHOR ADDRESS 82.1 TABBOTT AVEXUE APT 8  STREET ADDRESS 2460 SW 102 CT  3.1 TITLE VD Change Address 82.1 TABBOTT AVEXAPT 8	NAME	SWIFT, D	OLORES		DELETE	1.1 TITLE 1.2 NAME	i	100	DES MIDDE	☐ Change	
NAME STREET ADDRESS CITY-ST-ZIP NAME PD DELETE NAME STREET ADDRESS S215 ALBOTT AVE., #4A 23 STREET ADDRESS S217 ABBOTT AVE.NUE APTHOR 24 CITY-ST-ZIP NAME PD DELETE 3.1 TITLE DELETE 3.2 NAME STREET ADDRESS S217 ABBOTT AVE.NUE APT 8 32 NAME STREET ADDRESS S217 ABBOTT AVE.NUE APT 8 32 NAME STREET ADDRESS S217 ABBOTT AVE.NUE APT 8	NAME STREET ADDRESS	SWIFT, D 8217 ABI	OLORES BOTT AVE.		DELETE	1.1 TITLE 1.2 NAME 1.3 STREE	ET ADDRESS	PE	RESIANDRE 12 ARROTTAVEIX	☐ Change	
CITY-ST-ZIP MIAMI BEACH FL  1TILE PD	NAME STREET ADDRESS CITY-ST-ZIP	SWIFT, D 8217 ABI MIAMI BE	OLORES BOTT AVE.	Zí	,	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY-	ET ADDRESS ST-ZIP	PEI 821 ML	RESIANDRE 17 ABBOTTAVEIR AMI BEACH F	□ Change APT 9 □ L 33/4/	Addition
CITY-ST-ZIP MIAMI BEACH FL  1TILE PD	NAME STREET ADDRESS CITY-ST-ZIP TITLE	SWIFT, D 8217 ABI MIAMI BE D	OLORES BOTT AVE. EACH FL	Zí	,	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE	ET ADDRESS ST-ZIP	PEI 821 MI	RESIANDRE 17 ABBOTTAVEN AMI BEACH F	☐ Change  ATT 9  —	Addition
TITLE PD Change Add  NAME FERNANDEZ, OSMARA  SIRFET ADDRESS 2460 SW 102 CT  3.1 TITLE V D  3.2 NAME S T N I K, T A I S A  3.3 STREET ADDRESS 8.2 1.7 A B B O T T A V E A P T 8	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SWIFT, D 8217 ABI MIAMI BE D CHUBAT	OLORES BOTT AVE. EACH FL	Zí	,	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME	ET ADDRESS ST-ZIP	PEI 821 MI	RESIANDRE 17 ABBOTTAVEN AMI BEACH F	☐ Change  ATT 9  —	Addition
NAME FERNANDEZ, OSMARA  STREET ADDRESS 2460 SW 102 CT  32 NAME STADIK, TAISA 33 STREET ADDRESS 8217 ABBOTT AVELAPT 8	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SWIFT, D 8217 ABI MIAMI BE D CHUBAT 8215 ALE	OLORES BOTT AVE. EACH FL Y, WALTER BOTT AVE., #4A	Zí	,	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI	ET ADDRESS ST-ZIP ET ADDRESS	PER 821 ST. SPI	RESIANDRE 17 ABBOTTAVEIR AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVI	☐ Change  ATT 9  —	Addition
STREET ADDRESS 2460 SW 102 CT.  3.3 STREET ADDRESS 82/7 ABBOTT AVE APT 8	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE	OLORES BOTT AVE. EACH FL Y, WALTER BOTT AVE., #4A	Zí	DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY	ET ADORESS ST-ZIP ET ADORESS -ST-ZIP	PER SZI ST. SPI SZZ	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVI AMI BEACH F	□ Change  APT 9  □ 33/4/ □ Change	Addition
MIAMIEL TO THE TOTAL	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD	OLORES BOTT AVE. EACH FL Y, WALTER BOTT AVE., #4A EACH FL	Zí	DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	PER STISTIST STISTIND	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVI AMI BECH E	□ Change  APT 9  □ 33/4/ □ Change	Addition  Addition
CITY-ST-ZIP   MIAMIFL   34-CITY-ST-ZIP   M/A-M/ BEACH   CZ 35/4/	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNANI	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL	Zí	DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	□ Change  APT 9  □ 33/4/ □ Change    Change   Change	Addition  Addition  Addition
	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNANI 2460 SW	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.	Zí	DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	□ Change  APT 9  □ 33/4/ □ Change    Change   Change	Addition  Addition  Addition
NAME GONZALEZ, CESAR 4.2 NAME	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNANI	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.	\(\frac{1}{2}\)	DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.4. CITY	ET ADDRESS ST-ZIP ET ADDRESS - ST-ZIP ET ADDRESS - ST-ZIP ET ADDRESS - ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	Change   C	Addition  Addition  Addition
STREET ADDRESS 8217 ABBOTT AVE 4.3 STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP TITLE	SWIFT, D 8217 ABI MIAMI BE CHUBAT' 8215 ALE MIAMI BE PD FERNANI 2460 SW MIAMI FL D	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.	\(\frac{1}{2}\)	DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.4. CITY 4.1 TITLE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	Change   C	Addition  Addition  Addition
CITY-ST-ZIP MIAMI BEACH FL 44 CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SWIFT, D 8217 ABI MIAMI BE CHUBAT' 8215 ALE MIAMI BE PD FERNANI 2460 SW MIAMI FL D GONZALI	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.	\(\frac{1}{2}\)	DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	Change   C	Addition  Addition  Addition
	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNANI 2460 SW MIAMI FL D GONZALI 8217 ABI	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE	\(\frac{1}{2}\)	DELETE DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREI	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	Change   C	Addition  Addition  Addition
NAME DELA VEGA, OSCAR 52 NAME	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNAMI 2460 SW MIAMI FL D GONZALI 8217 ABI MIAMI BE	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE	\(\frac{1}{2}\)	DELETE DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREI 3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY 4.1 CITY	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	Change   C	Addition  Addition  Addition
STREET ADDRESS 8217 ABBOTT AVE., #5 5.3 STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNAMI 2460 SW MIAMI FL D GONZALI 8217 ABI MIAMI BE VD	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE EACH FL	\(\frac{1}{2}\)	DELETE DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY- 5.1 TITLE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	Change   C	Addition  Addition  Addition  Addition
CITY-ST-ZIP MIAMI BEACH FL 5.4 CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNAMI 2460 SW MIAMI FL D GONZALI 8217 ABI MIAMI BE VD DELA VE	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE EACH FL  GA, OSCAR	\(\frac{1}{2}\)	DELETE DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	Change   C	Addition  Addition  Addition  Addition
	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNAMI 2460 SW MIAMI FL D GONZALI 8217 ABI MIAMI BE VD DELA VE 8217 ABI	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE EACH FL  GA, OSCAR BOTT AVE., #5		DELETE  DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREI 5.3 STREI 5.3 STREI 5.3 STREI 5.4 STREI 5.5 STREI 5.5 STREI 5.6 STREI 5.7 STREI 5.7 STREI 5.8 STREI 5.8 STREI 5.8 STREI 5.9 STREI 5.9 STREI 5.9 STREI 5.9 STREI 5.1 STREI 5.1 STREI 5.2 STREI 5.3 STREI 5.3 STREI 5.3 STREI 5.3 STREI 5.3 STREI 5.4 STREI 5.5 STREI 5.5 STREI 5.6 STREI 5.6 STREI 5.7	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	□ Change  APT 9 □ Change  Change □ Change □ Change □ Change	Addition  Addition  Addition  Addition
NAME: FERNANDEZ, ARTURO 6.2 NAME	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SWIFT, D 8217 ABI MIAMI BE D CHUBAT 8215 ALE MIAMI BE PD FERNANI 2460 SW MIAMI FL D GONZALI 8217 ABI MIAMI BE VD DELA VEI 8217 ABI MIAMI BE MIAMI BE	OLORES BOTT AVE. EACH FL  Y, WALTER BOTT AVE., #4A EACH FL  DEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE EACH FL  GA, OSCAR BOTT AVE., #5		DELETE  DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREI 5.4 CITY	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	□ Change  APT 9 □ Change  Change □ Change □ Change □ Change	Addition  Addition  Addition  Addition
STREET ADDRESS 8217 ABBOTT AVE., #3 6.3 STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNANI 2460 SW MIAMI FL D GONZALI 8217 ABI MIAMI BE VD DELA VEI 8217 ABI MIAMI BE D FERNANI	OLORES BOTT AVE. BOTT AVE. WALTER BOTT AVE., #4A BOTT AVE., #4A BOTT AVE. CEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE BACH FL  GA, OSCAR BOTT AVE., #5 BACH FL  DEZ, ARTURO		DELETE  DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREI 5.4 CITY- 6.1 TITLE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	□ Change  APT 9 □ Change  Change □ Change □ Change □ Change	Addition  Addition  Addition  Addition
CITY-ST-ZIP MIAMI BCH. FL 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.5 L bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(3)(i). Floride Statutes. I further certify that the information stated in Section 1.19.07(3)(i).	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SWIFT, D 8217 ABI MIAMI BE D CHUBAT' 8215 ALE MIAMI BE PD FERNANI 2460 SW MIAMI FL D GONZALI 8217 ABI MIAMI BE VD DELA VEI 8217 ABI MIAMI BE D FERNANI 8217 ABI MIAMI BE D FERNANI 8217 ABI MIAMI BE D	OLORES BOTT AVE. BOTT AVE. WALTER BOTT AVE., #4A BOCH FL  DEZ, OSMARA 102 CT.  EZ, CESAR BOTT AVE BACH FL  GA, OSCAR BOTT AVE., #5 BACH FL  DEZ, ARTURO BOTT AVE., #3		DELETE  DELETE	1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREI 5.4 CITY- 6.1 TITLE 6.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PERSONAL SERVICES	RESIANDRE 17 ABBOTTAVEN AMI BEACH F 10 NEK, HALINA 17 ABBOTT AVE AMI BEACH FO WIK, TAISA 17 ABBOTT AVE	□ Change  APT 9 □ Change  Change □ Change □ Change □ Change	Addition  Addition  Addition  Addition

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 119.07(3)(). 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.