FILE NOW: FILING FEE IS \$61,25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 728877

(2)

Pa1m	Beach White Ho	use Associatio	n NO.4	, Inc.				
1909	79th Street Cs	wy						
Miami Beach, Fl. 33141-4345 Principal Place of Business Maining Address								
Principal Plac	ce of Business	Making Address						
					3. Date Incorporated or Qualified	3a. Date of Last	Report	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For	
21 26					59-116073	/	lot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					(Additional	
22 27					5. Certificate of Status Desireo	Fee F	Required	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added Added	to Fees	
Zıp	Country	Zip	Country	y	8. This corporation has liability for		s 1 99 .032	
24	25	29	30			Yes No		
	9. Name and Address of Cui	rent Registered Agent		Τ.,	10. Name and Address of New Re	egistered Agent		
_			81	Name				
Steinhardt, Milton F.				Street Addre	et Address (P.O. Box Number is Not Acceptable)			
1909 79th Street Cswy								
Miami Beach, Fl. 33141								
			84	City		85 Z _I D	Code	
						FL 🐃		
11. Pursuant office or	to the provisions of Sections 617 registered apent, or both in the Si	0502 and 617 1508, Florida Stat ate of Florida, Such change was	utes, the abov s authorized b	e-named corp v the corporati	oration submits this statement for the join's board of directors. I hereby acce	purpose of changing of the appointment a	its registered s registered	
agent 1 a	am familiar with, and accept the of	igations of Section 617.0503, I	Florida Statute	s.	on a bound of directory of this real, does	р. г.о дррожите к а	5 - 0g.0.0.00	
SIGNATURE								
	Signature ityped or printed name of mysterio			er lisignature require		DA'E	SE IN 12	
12.	OFFICERS	AND DIRECTORS	13. 11 TIFLE		ADDITIONS/CHANGES TO OFFI	Change		
NAME	V/P/D		1.2 NAME			C 4ag.		
STREET ADDRESS	Goldman, Mort	on		T ADDRESS				
	190070th Street Causeway							
C/TY-ST-ZIP T/TLE	Miami Beach,	1. 33141 DELETE	1 4 CITY - 2 1 TITLE	SI-ZIP		Change	Addition	
NAME	S/T/D		2.2 NAME			C outling:		
	Goldman, Glad	lvs		* *0000000				
STREET ADDRESS	1909-79+h Street			T ADDRESS				
CITY ST-ZIP	Miami Beach, I	33141 DELETE	2 4 CITY - 3 1 Trile	ST ZIP		Change	Adection	
NAME	P/D		3.2 NAME		•			
	Stainbardt Milton B			7. 4DGDGGG				
STREET ADDRESS				I ADORESS				
CITY ST ZIP	1909 79th St. Miami Beach,	F1. 33171	34 CITY- 41 TITLE	ST-ZP		Change	Addition	
NAME			4 2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5 1 TITLE	51 - ZIP		Change	Addition	
						☐ or ange	L. Aodrio	
NAME			5.2 NAME					
STREET ADDRESS				I ADDRESS				
CITY ST-ZIP		DELETE	5.4 CITY -			Change	Addit:on	
TITLE		DELETE	6 1 TITLE		1000018 ⁻ -06/26/96010	75 821 ^{Change}	☐ vanicou	
NAMŁ			6 2 NAME		-06/26/96010	032014		
STREET ADDRESS	1		■ 63 STREE	T ADDRESS				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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

6 3 STREET ADDRESS

SIGNATURE: ±

STREET ADDRESS

Muta Culture

BIGHATURE AND TYPED OR PRINTED NAME OF SIGNI ING OFFICER OR DIRECTOR 196 305-866-6V79 CS 6725196