| DOCUMENT # 731861 Copyration Name DOWNTOWN SENIOR CITIZENS COMMUNITY CENTER, INC. | Coporation Name DOWNTOWN SENIOR CITIZENS COMMUNITY CENTER, INC. | | DNPROFIT RPORATION JAL REPORT 1999 | | Katherin Secretary | | FIL Apr 23, 19 Secretary 04-23-1999 9020 | 99 8:00 of Sta |) am te |
|--|---|---|---|---|--|--|---|--|---|
| | | Corporation | n Name | | | r | | | |
| a user Versar 200 STREET UNAIL FL 2012 Principal Place of Business 2a. Mailing Address 2a. Mailing Address 2b. Country 2b. Declard of Status Objective 3b. 75.00 Marg Bard 4b. Perturber 2b. Mame and Address 4b. Margin 4b. Margi | a Corpersor 20 Street AN IF 3332 If a NOTHEAST 20 STREET IN IF A STREET IN IF A NO | | | | | | * 4 \$04643- | 90206 - 4 | |
| Interview 20 02/13/1975 Suite, Apt. 4, etc. 50/16, Apt. 9, etc. 4, FED. humber interview City & State CDry & State 5. Certificate of Status Desired file Applicable Zip Country Zip Country E. Election Cernalization Financing A Rapined Zip Countrext Zip Countrext E. Election Cernalization Financing A Rapined PHILUPS, KATHLEEN S. Outrent Registered Agent Interview File Application A Status Desired Status Desine Status Desired Status Desine St | | 8 NORTHEA | ST 2ND STREET | 118 | NORTHEAST 2ND STRI | EET | | | |
| Suite. Apt. #, etc. Suite. Apt. #, etc. 4. FEI Number Applied For- Not Applicable City & State 27 Suite. Apt. #, etc. State. Apt. #, etc. State. Applicable City & State 28 Country 6. Election Campaign Financing Not Applicable 20 Country 29 Country 6. Election Campaign Financing Added to Fees 8. Hame and Address of Current Registered Agent 10. Name and Address of New Registered Agent Added to Fees 100. Biolog BRICKEL APENUE APT 1502 83 State Address of New Registered Agent 10. Name is Not Acceptable) 100. Biolog BRICKEL AFENUE APT 1502 83 State Address of Current Registered Agent 10. Name is Not Acceptable) 100. Biolog BRICKEL APENUE APT 1502 84 City FL [as Zip Code 110. Name Number is not Acceptable 83 State Address of Current Registered Agent 10. Name State Address of Current Registered Agent 10. Name State Address of Current Registered Agent 10. Name State Address of Current Registered Agent 10. Current State Address of Current | Suite Act # etc. Suite Act # etc. FEI Number Applied For SOF 1240974 Applied For Sof Act Applicable City & State 20 Country 5. Carificate of Status Desired Fe. Required Zip Country 2. Election Campaign Financing \$5.00 May Be Actional Free Required Actional Free Required 20 Zip Country 6. Election Campaign Financing \$5.00 May Be Actional Free Required 9. Name and Address of Current Registersed Agent 81 Name Actional Free PHILUPS, KATHEEN 20 Country 6. Election Campaign Financing \$5.00 May Be Actional Free Disp BROCKELL AVENUE APT 1502 83 State Address of New Registered Agent 81 State Address of Country 6. City FL 83 City A Country 10. Remain With and cooption State Of Procids Status Agent and Information State Of Of Information State Of | Principal P | Nace of Business | | Mailing Address | | | | |
| City & State City & State S. Centricate of Status Desired \$67.57.Academatic Zip Country Zip Country 6. Election Cempaign Financing Addet or Fees 9. Name and Address of Current Registered Agent 10. Name and Address of Aurent Registered Agent 81 Name Address of Aurent Registered Agent 9. Name and Address of Current Registered Agent 81 Name Addet or Fees 9. Name and Address of Current Registered Agent 81 Name Address of Aurent Registered Agent 10. Name and Address of Current Registered Agent 81 Name 82 Street Address of Current Registered Agent 10. Name and Address of Current Registered Agent 81 Name 82 Street Address of Current Registered Agent 10. Name and Address of Current Registered Agent 81 Name 82 Street Address of Current Registered Agent 10. Name and Address of Current Registered Agent 81 Name 82 Zip Code 10. Name and Address of Street Address of Street Address of Street Address of Aurent Registered Agent 81 Name Photometric in the provision of Street Address of Street Address of Street Address of | City & State City & State S. Certificate of Status Desired \$9.75 Additional Zip Zip Country Election Campaign Financing \$5.00 May Be Addition Free A. Name and Address of Current Registered Agent 10. Name and Address of Rev Registered Agent 11. Name and Address of Rev Registered Agent PHILLPS, KATHLEEN Bog BRICKELL AVENUE APT 1502 13. Name and Address of Current Registered Agent 11. Name and Address of Rev Registered Agent Bog BRICKEL AVENUE APT 1502 14. Only 15. Street Address (P.O. Box Number is Not Acceptable) 12. Street Address (P.O. Box Number is Not Acceptable) Bog BRICKEL AVENUE APT 1502 14. Only 15. Street Address (P.O. Box Number is Not Acceptable) 12. Street Address (P.O. Box Number is Not Acceptable) Bog BRICKEL AVENUE APT 1502 14. Only 12. Street Address (P.O. Box Number is Not Acceptable) 12. Street Address (P.O. Box Number is Not Acceptable) Bog BRICKEL AVENUE APT 1502 13. Street Address (P.O. Box Number is Not Acceptable) 13. Street Address (P.O. Box Number is Not Acceptable) Bog BRICKEL AVENUE APT 1502 14. Only 14. Only 14. Only 14. Only I. Draws of the protein of Statutes and street address (P.O. Box Number is Not Acceptable) 15. Street Address 15. Street Address Bog Draws of Statute Aptreteress and the p | Suite, Apt. | #, etc. | | | | | | <u> </u> |
| Zp Country Zp Country East of counseling Financing St.00 May Se Added to Frees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent Added to Frees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent Address of New Registered Agent 9. Name and Address of Section 51 502 84 Name 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 1000 BRICKELL AVENUE APT 1502 84 City FL 85 Zip Code 11 Turus Fund Contribution 10. Status of Flocids. Status of Flo | Zip Country Zip Country St. Direction Country St. Direction Country Added to Fees 120 120 120 120 120 10. Name and Address of New Registered Agent 4dded to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 4dded to Fees PHILUPS, KATHLEEN 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 13009 BRICKELL AVENUE APT 1502 4d 10. Name and Address of New Registered Agent 10. Name 1400 Creation of Sections 617.0502 and 617.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, the 051816 of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, the 051816 of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent or both and the of Florida. Such change was authorized by the corporation's board of directors. I horeby accept the appointment as registered agent, or both, the 05181 for Directors in 12 CMANUTER Uprote or was authorized by the corporation's board of directors. I horeby accept the appointment as registered agent, or both, the 05181 for Directors in 12 Core or agent and the nome and addresed agent, or both, the 05181 for Directors in 1 | City & Stat | e | | | <u>;</u> | | \$8.75 A | dditional |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PHILIPS, KATHLEEN 51 1000 BRICKELL AVENUE APT 1502 83 MAMI, FLORDA 84 10. Pursuant to the provisions of Sections 617 0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the pursuant of Section 517.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the appointment as registered agent and maintain with, and accept the obligation of Section 517.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the appointment as registered agent and indirect the obligation of Section 517.0505, Forida Statutes, MIGNATURE Bagearn, typed or privel new of registered agent and its of agentable. (hOTE Registered Agent agentar et all and the florida Statutes, MIGNATURE Bagearn, typed or privel new of registered agent and its of agentable. (hOTE Registered Agent agentar et all and the flogation). (hOTE Registered Agent agentar et all and the flogation). MARE 200000 OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. NEET ADDRESS 13.5TRET ADDRESS (Change) Addition MARE 200000 0 ELETE 11 TITLE (Change) Addition NEE | | Zip | | ry z | - - | <i>`</i> | | | |
| PHILIPS, KATHLEEN 81 Name PHILIPS, KATHLEEN 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 83 84 City FL 84 City FL 83 84 City FL 84 85 City FL 85 86 City FL 85 87 City FL 85 88 City FL 85 89 City FL 85 89 City FL 85 89 City FL 85 80 Finite with interstate of Finite Statutes. Interestate of the purpose of changing its registered of directors. Interest accept the obligations of Section 517,0502, Finited Statutes. OATE 80 OFFICIERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 0 OFFICIERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10 Change 13/MAE Change Addition 12 MADDEN, HOMAS 13/MAE 13/MAE Change Addition 13 Street Address 13 Change Addition 14 | PHILIPS, KATHLEEN 81 Name PHILIPS, KATHLEEN 82 Street Address (P.O. Box Number is Not Acceptable) 33129 84 City FL_ list 33129 84 City FL_ list 1- Pursuent 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 registered orgen, to tothing the orgitations of sections 617.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered orgen, to tothing the orgitations of Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered orgen, to tothing the orgitation of sections 17.0503, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered orgen, to the provision of Section 617.0503, Florida Statutes, the above-named corporation submits board of directors. I hereby accept the organized agent or tothago and provisions of Section 617.0503, Florida Statutes, the above-named corporation submits board of directors. I hereby accept the organized agent or tothago and provisions of Section 617.0503, Florida Statutes, the above-named corporation submits hereby accept the organized agent or tothago and provisions of Section 617.0503, Florida Statutes, the above-named corporation submits hereby accept the organized agent or tothago and provisions of Section 617.0503, Florida Statutes, the above-named corporation submits hereby accept the organized agent organized | | | | | <u>30 </u> | Trust Fund Contribution | | U F995 |
| 1809 BRICKELL AVENUE APT 1502 83 MAMI, FLORIDA 83 33129 84 City FL_ 85 23129 84 City 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 registered agent. 1 and mainlaw with, and accept the obligations of Sections 617,0503, Florida Statutes. IGNATURE Igniture, typed or prive rare of registered agent and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent ad the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent ad the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent ad the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent ad the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent ad the state applicable. (NOTE Registered Agent agentage was authorized by the corporation's board of directors. I hereby accept the applicable. Idea PD Intellet Intellet Intellet Intellet Intellet Intelet Intelet Intellet | 1809 BRICKELL AVENUE APT 1502 83 MAMI, FLORIDA 84 S3129 84 | | | <u> </u> | | 81 Name | | | |
| MAMI, FLORIDA 83 33129 84 City FL 85 21 Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation's board of directys. I heredy accept the appointment as registered agent, or the obligations of, Section 617,0503, Florida Statutes. IONATURE Bigmane, tope or primed reams of majoritational spot and their applications. (NTE: Registered agent, or the obligations of, Section 617,0503, Florida Statutes. IONATURE Bigmane, tope or primed reams of majoritational spot and their applications. (NTE: Registered agent, or the obligations of, Section 617,0503, Florida Statutes. IONATURE Bigmane, tope or primed reams of majoritational spot and their applications. (NTE: Registered agent, or theready accept and their applications. RETADDRES 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ILI NE Intrac Orbit of the obligations of Section 617, 5032, and their applications. MAM, FL 00000 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INE NODES 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INE NODES 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INE NODES 13. ADDITIONS/CHANGES TO OFFICERS AND AGent A | MIANI, FLORIDA 81 33129 84 City FL 14. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named comporation submits this statement for the purpose of changing its negistered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby scelep the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby scelep the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby scelep the appointment as registered agent, or private and the registered agent, or private and the registered agent, or private area of the appointment as registered agent, or private and the registered agent appoint register agent, or private area of the appointment as registered agent, or private area of the appoint registered agent, or private area of the appointment as registered agent, or private area of the appoint registered agent, or private area of the appointment as registered agent, or private area of the appoint registered agent, or private area of the appoint and the registered agent, or private area of the appoint and the registered agent, or private area of the appoint area of the appoint and the registered agent, or private area of the appoint agent. The appoint area of the appoint | | | | | 82 Street Add | iress (P.O. Box Number is Not Acceptable) | | |
| 33129 It // City It // | 33129 E4 City E4 Zip Code L. Pursuant to the provisions of Sections 617 002 and 617 1508. Florida Statutes, the above-named comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the appointment as registered offer one partial manufactored by the comportation's board of directors. I hereby accept the obligations of Section 617.0503. Florida Statutes. IGNATURE DELETE 11 mute Addition NSTE P MAMURE I appoint with the flore one partial manufactore by the comportation's based of directors. I appoint the directore by addition NSTE P | | | 1502 | | 83 | | <u> </u> | , |
| 1. 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 registered agent. and accept the obligations of, Section 617.0503, Florida Statutes. INDATURE Statutes. Signature, topid or price rank of 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, and accept the obligations of, Section 617.0503, Florida Statutes. INDATURE Statutes. Strength Lam darget and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0503, Florida Statutes. INDEX. OFFICERS AND DIRECTORS 2. OFFICERS AND DIRECTORS 11 NEE OFFICERS AND DIRECTORS 12 NWE 13 STREET ADDRESS 13 STREET ADDRESS 14 ctrv-str.2P NEE MAMILE, 00000 14 ctrv-str.2P NEE STD DELETE 12 NME 21 street ADDRESS 13 STREET ADDRESS 22 street ADDRESS 14 ctrv-str.2P | I. 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 registered agent. If an infamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE Septature, typed or privations of sections 617.0503, Florida Statutes. IGNATURE OFFICERS AND DIRECTORS 13. OFFICERS AND DIRECTORS 14. OFFICERS AND DIRECTORS 14. OFFICERS AND DIRECTORS 15. OFFICERS 15. OFFICERS 15. OFFICERS 15. OFFICERS 15. 15. 15. 15. 15. 15. 15. 15 | | UNIDA | , | | | ` | · | |
| ILE PD Change Addition MADDEN, THOMAS I19 ME 2ND ST IST STUP MIAMI,FL 00000 IC Change Addition MAMM,FL 00000 IC Change Addition MAMM IC CHANGE IC Change Addition MAMM IC CHANGE | LE PD DELETE 1.1 TTLE Change Addition MADDEN, THOMAS 12 WME 13 WME Change Addition NFS.T2P MIAMI,FL 00000 14 CITY.ST.ZIP Change Addition VE STD DELETE 21 TTLE Change Addition ME PHILUPS, KATHLEEN 22 MME Change Addition ME PHILUPS, KATHLEEN 23 STREET ADDRESS Change Addition NFS.T2P MIAMI,FL 00000 24 CITY.ST.ZIP Change Addition NEET ADDRESS 100000 24 CITY.ST.ZIP Change Addition NEET ADDRESS 309 BRICKELL AVE #1502 23 STREET ADDRESS Change Addition NFS.T2P DELETE 31 TTLE Change Addition NFS.T2P DELETE 31 STREET ADDRESS Change Addition NFS.T2P MIAMI,FL 00000 34 CITY.ST.ZP Change Addition NFE ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS NFS.T2P Change Addition STRET ADDRESS STR | 1 D | to the provisions of Sec | ctions 617.0502 and 617 | 7.1508, Florida Statute Such change was au | the above-named cor | poration submits this statement for the purp | FL | registered |
| REET ADDRESS 113 STREET ADDRESS YST-ZP MIAMI,FL 00000 LE STD VF.ST-ZP DELETE VF.ST-ZP DELETE VF.ST-ZP MIAMI,FL 00000 VE VPD VF.ST-ZP MIAMI,FL 00000 VE VPD VPD OELETE VIE VPD VF.ST-ZP MIAMI,FL 00000 VE OELETE VPD OELETE VF.ST-ZP MIAMI,FL 00000 VF.ST-ZP S25 NE 58TH ST VST-ZP 3 STREET ADDRESS VF.ST-ZP MIAMI,FL 00000 VF.ST-ZP Addition VF.ST-ZP Addition VF.ST-ZP Addition VF.ST-ZP Addition VF.ST-ZP Addition VF.ST-ZP Addition VF.ST-ZP STREET ADDRESS < | REET ADDRESS 118 NE 2ND ST 1.3 STREET ADDRESS Y-ST-2P MIAMI,FL 00000 0 ELETE 21 TTLE KE STD 0 ELETE 21 TTLE WE PHILUPS, KATHLEEN 23 STREET ADDRESS | - Pursuant office or r agent. I a GNATURE | registered agent, or both im familiar with, and acc Signature, typed or printed name | h, in the State of Florida cept the obligations of, S ne of registered agent and title if a | , Such change was au Section 617.0503, Flori | is, the above-named cor thorized by the corporat ida Statutes. Registered Agent signature requir | ed when reinstatling) | FL ose of changing its appointment as re- | registered gistered |
| MIAMI,FL 00000 14 CITY-ST-ZIP LE STD DELETE 21 TTLE MME PHILLIPS, KATHLEEN 23 STREET ADORESS B09 BRICKELL AVE #1502 23 STREET ADORESS MAMI, FL 00000 24 CITY-ST-ZP MAMI, FL 00000 24 CITY-ST-ZP MAMI, FL 00000 24 CITY-ST-ZP MEE VPD DELETE NEE VPD DELETE NEE VPD DELETE NEE VPD DELETE NEET ADORESS SZS NÆ SZS NÆ SSTH ST 33 STREET ADORESS TY-ST-ZP MIAMI,FL 00000 1Y-ST-ZP MIAMI,FL 00000 1Y-ST-ZP MIAMI,FL 00000 1Y-ST-ZP 4. CITY-ST-ZP ME 1 DELETE NE 2 NAME REET ADORESS 2 NAME NE 2 NAME NE 2 NAME NE 2 NAME NE 2 NAME NY-ST-ZP 52 NAME SI STREET ADDRESS 52 NAME | MIAMI,FL 00000 14 CITV-ST-ZIP LE STD DELETE 21 TITLE MAR PHILLIPS, KATHLEEN 22 NAME Bio9 BRICKELL AVE #1502 23 STREET ADDRESS MAMI, FL 00000 2.4 CITV-ST-ZIP MAMI, FL 00000 2.4 CITV-ST-ZIP MAMI, FL 00000 2.4 CITV-ST-ZIP ME HURTAK, JOHN S25 NE 58TH ST 33 STREET ADDRESS Y-ST-ZIP MIAMI,FL 00000 Nr-ST-ZIP Addition ME HURTAK, JOHN S25 NE 58TH ST 33 STREET ADDRESS Y-ST-ZIP MIAMI,FL 00000 RET ADDRESS ACTV-ST-ZIP ME ACTV-ST-ZIP ME 4.2 NAME NE 4.3 STREET ADDRESS NY-ST-ZIP 4.4 CITV-ST-ZIP ME 52 STARE NY-ST-ZIP 4.4 CITV-ST-ZIP ME 52 STARE NE 52 STARE STREET ADDRESS Change NY-ST-ZIP ACTV-ST-ZIP ME 52 STARE ME 52 STARE STREET ADDRESS STRE | 1. Pursuant office or r agent. I a IGNATURE 2. | egistered agent, or both im familiar with, and acc Signature, typed or printed nam | h, in the State of Florida cept the obligations of, S ne of registered agent and title if a | Such change was au Section 617.0503, Flori pplicable (NOTE: TORS | is, the above-named cor thorized by the corporat ida Statutes. Registered Agent signature require 13. | ed when reinstatling) | FL ose of changing its appointment as repointment a | registered gistered |
| Intel STD DELETE 21 TTLE Change Addition Mee PHILLIPS, KATHLEEN 22 NAME 23 STREET ADDRESS | LE STD DELETE 21 TITLE Change Addition ME PHILLIPS, KATHLEEN 23 NAME 23 STREET ADDRESS | 1. Pursuant office or r agent. a IGNATURE 2. ILE WE | registered agent, or both im familiar with, and acc Signature, typed or printed nam (PD MADDEN, THOMAS | n, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC | Such change was au Section 617.0503, Flori pplicable (NOTE: TORS | is, the above-named con thorized by the corporat ida Statutes. Registered Agent signature requir 13. 1.1 ITTLE | ed when reinstatling) | FL ose of changing its appointment as repointment a | registered gistered |
| REET ADDRESS 1809 BRICKELL AVE #1502 2.3 STREET ADDRESS MIAMI, FL 00000 2.4 CITY-ST-ZP REE VPD DELETE S25 NE 58TH ST 3.3 STREET ADDRESS MIAMI, FL 00000 3.4 CITY-ST-ZP ME Q DELETE REET ADDRESS 4.2 ZMAME REET ADDRESS 4.2 ZMAME REET ADDRESS 4.2 ZMAME REET ADDRESS 4.2 ZMAME REET ADDRESS 4.4 CITY-ST-ZP TrST-2P 4.4 CITY-ST-ZP TLE Q DELETE NWE 5.3 STREET ADDRESS TY-ST-2P 5.3 STREET ADDRESS | REET ADDRESS 1809 BRICKELL AVE #1502 2.3 STREET ADDRESS IV: ST: ZP IIIAMI, FL 00000 2.4 CTV: ST: ZP ILE VPO IDELETE 3.1 TTLE IV: ST: ZP IDELETE 3.1 TTLE IV: ST: ZP IIIAMI, FL 00000 2.4 CTV: ST: ZP IV: ST: ZP IDELETE 3.1 TTLE IV: ST: ZP IIIAMI, FL 00000 3.4 CTV: ST: ZP ILE IDELETE 4.1 TTLE INE IDELETE IDELETE INE IDELETE IDELETE INE IDELETE ITTLE INE IDELETE STREET ADDRESS IV: ST: ZP IDELETE STREET ADDRESS IV: ST: ZP IDELETE STREET ADDRESS INE IDELETE STREET ADDRESS IV: ST: ZP IDELETE STREET ADDRESS IV: ST: ZP IDELETE STREET ADDRESS INE IDELETE | 1. Pursuant office or r agent. I a IIGNATURE 2. TLE WIE REET ADDRESS | registered agent, or both im familiar with, and acc Signature, typed or printed nem (PD MADDEN, THOMAS 118 NE 2ND ST | n, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC | Such change was au Section 617.0503, Flori pplicable (NOTE: TORS | is, the above-named con thorized by the corporat ida Statutes. Registered Agent signature requir 13. 1.1 ITTLE 1.2 NAME 1.3 STREET ADDRESS | ed when reinstatling) | FL ose of changing its appointment as repointment a | registered gistered |
| NTX-ST-2P MIAMI, FL 00000 2.4 CTY-ST-ZP Inte VPD DELETE 3.1 TTLE INME HURTAK, JOHN 32 NAME REET ADDRESS 525 NE 58TH ST 33 STREET ADDRESS TY-ST-ZP MIAMI,FL 00000 34. CITY-ST-ZP MIAMI,FL 00000 34. CITY-ST-ZP MIAMI,FL 00000 34. CITY-ST-ZP Inte DELETE 4.1 TTLE Inte DELETE 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS TY-ST-ZP 4.4 CTY-ST-ZP Inte DELETE Addition 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS TY-ST-ZP 4.4 CITY-ST-ZP Inte DELETE STREET ADDRESS 5.1 TTLE Inte S1 STREET ADDRESS S2 NAME S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS Inte S1 STREET ADDRESS S4 CITY-ST-ZP Change Inte S1 STREET ADDRESS S4 CITY-ST-ZP Change Inte S1 STREET ADDRESS S4 CITY-ST-ZP | NY-ST-2P MIAMI, FL 00000 2.4 CITY-ST-2P ILE VPD DELETE 3.1 TITLE MKE HURTAK, JOHN 32 NAME S25 NE 58TH ST 3.3 STREET ADDRESS MIAMI, FL 00000 34. CITY-ST-2P ME 1 DELETE At TITLE Change Addition 4. STREET ADDRESS YY-ST-2P 4.4 CITY-ST-2P ILE DELETE S1 STREET ADDRESS 4.3 STREET ADDRESS YY-ST-2P 4.4 CITY-ST-ZP ILE DELETE S1 STREET ADDRESS 3.5 STREET ADDRESS YY-ST-2P 4.4 CITY-ST-ZP ILE DELETE S2 STREET ADDRESS 5.4 CITY-ST-ZP ME 6.3 STREET ADDRESS YY-ST-2P S4 CITY-ST-ZP AL DELETE 6.1 MILE Change Addition 6.2 NAME S2 STREET ADDRESS 5.4 CITY-ST-ZP ME 6.1 STITLE | Pursuant office or r agent. a IGNATURE Control Contro Control Contr | registered agent, or bott im familiar with, and acc signature, typed or printed nem (PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 | n, in the State of Florida cept the obligations of, S ne of registered agent and title if a OFFICERS AND DIREC | Such change was au Section 617.0503, Flori pplicable. (NOTE: TORS | is, the above-named con thorized by the corporat ida Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | ed when reinstatling) | FL ose of changing its appointment as repointment as repointm | registered gistered PRS IN 12 |
| ILE VPD DELETE 3.1TTLE Change Addition MME HURTAK, JOHN 32 NAME REET ADDRESS 525 NE 58TH ST 33 STREET ADDRESS TY-ST-ZIP MIAMI,FL 00000 34. CITY-ST-ZIP TLE DELETE 4.1TTLE Change Addition MME 4.2 NAME REET ADDRESS 44. CITY-ST-ZIP TLE DELETE 5.1 TTLE Change Addition MME S3 STREET ADDRESS FX-ST-ZIP S3 STREET ADDRESS MME DELETE 6.1 TTLE Change Addition ME S3 STREET ADDRESS FX-ST-ZIP | LE VPD DELETE 3.1 TTLE Change Addition MME HURTAK, JOHN 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITV-ST-2/P Image: Change Addition NME DELETE 3.4 CITV-ST-2/P Image: Change Addition NME DELETE 4.1 TTLE Change Addition ME 4.2 NAME 4.3 STREET ADDRESS Addition PV-ST-2/P 4.4 CITV-ST-2/P Image: Change Addition ME 4.3 STREET ADDRESS Addition Image: Change Addition ME 4.2 NAME 4.2 STARE Image: Change Addition ME 5.2 NAME 5.3 STREET ADDRESS Image: Change Addition ME 5.3 STREET ADDRESS 5.3 STREET ADDRESS Image: Change Addition ME 6.2 NAME 5.3 STREET ADDRESS Image: Change Addition ME 6.2 NAME 6.3 STREET ADDRESS Image: Change Addition ME 6.3 STREET ADDRESS Image: Change Addition Image: Change Image: Change Image: Change | Pursuant office or r agent. a IGNATURE Construction Constructin Construction Construction Construction Construc | egistered agent, or bott im familiar with, and acc signature, typed or printed nem (PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLEE | n, in the State of Florida cept the obligations of, S ne of registered agent and title if a DFFICERS AND DIREC DFFICERS AND DIREC | Such change was au Section 617.0503, Flori pplicable. (NOTE: TORS | is, the above-named conthorized by the corporation ida Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME | ed when reinstatling) | FL ose of changing its appointment as repointment as repointm | registered gistered PRS IN 12 |
| REET ADDRESS 525 NE 58TH ST 3.3 STREET ADDRESS MIAMI,FL 00000 34. CTY-ST-ZIP LE DELETE 4.1 TTLE ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS Y-ST-ZIP 4.4 CTY-ST-ZIP ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS Y-ST-ZIP 4.4 CTY-ST-ZIP LE DELETE S1 STREET ADDRESS 4.4 CTY-ST-ZIP NE DELETE S2 NAME 5.3 STREET ADDRESS Y-ST-ZIP 5.4 CTY-ST-ZIP LE DELETE S1 STREET ADDRESS 5.3 STREET ADDRESS Y-ST-ZIP 5.4 CTY-ST-ZIP LE DELETE S1 STREET ADDRESS 5.3 STREET ADDRESS Y-ST-ZIP 5.4 CTY-ST-ZIP LE DELETE S2 NAME 6.1 TTLE S2 NAME 6.3 STREET ADDRESS Y-ST-ZIP 6.1 TTLE S2 NAME 6.3 STREET ADDRESS Y-ST-ZIP 6.1 CTY-ST-ZIP | REET ADDRESS 525 NE 58TH ST 3.3 STREET ADDRESS MIAMI,FL 00000 3.4. CITY-ST-ZIP LE DELETE 4.1 TITLE ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS IV-ST-ZIP Change Addition ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS IV-ST-ZIP 44 CITY-ST-ZIP LE DELETE S1 STREET ADDRESS 5.3 STREET ADDRESS KE 5.3 STREET ADDRESS VY-ST-ZIP Change LE DELETE S1 STREET ADDRESS 5.3 STREET ADDRESS KEET ADDRESS 5.3 STREET ADDRESS VY-ST-ZIP Statutes LE S1 STREET ADDRESS S2 NAME S1 STREET ADDRESS S4 CITY-ST-ZIP Change LE S1 STREET ADDRESS S4 CITY-ST-ZIP S1 STREET ADDRESS NEET ADDRESS S3 STREET ADDRESS S4 CITY-ST-ZIP S4 CITY-ST-ZIP LE S1 STREET ADDRESS KeET ADDRESS S3 STREET ADDRESS S4 CITY-ST-ZIP S4 CITY- | Pursuant office or r agent. I a IGNATURE C. LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS | egistered agent, or bott im familiar with, and acc signature, typed or printed nem (PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLEE 1809 BRICKELL AV | n, in the State of Florida cept the obligations of, S ne of registered agent and title if a DFFICERS AND DIREC DFFICERS AND DIREC | Such change was au Section 617.0503, Flori pplicable. (NOTE: TORS | is, the above-named conthorized by the corporation Statutes. Registered Agent signeture require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS | ed when reinstatling) | FL ose of changing its appointment as repointment as repointm | registered gistered PRS IN 12 |
| Y-ST-ZP MIAMI,FL 00000 34. CTY-ST-ZIP ILE DELETE 4.1 TTLE Change Addition ME 4.2 NAME 4.3 STREET ADDRESS | Yr-ST-2P MIAMI,FL 00000 34. CTY-ST-ZP ILE DELETE 4. TTTLE ME 4.2 NAME REET ADDRESS 43 STREET ADDRESS ITY-ST-ZP 44. CTY-ST-ZIP ILE DELETE STREET ADDRESS 44. CTY-ST-ZIP ILE DELETE STREET ADDRESS 51. TTLE ME 52. NAME STREET ADDRESS 53. STREET ADDRESS IV-ST-ZIP 54. CTY-ST-ZIP ILE DELETE Street ADDRESS 54. CTY-ST-ZIP IV-ST-ZIP DELETE ME 63. STREET ADDRESS IV-ST-ZIP Change Addition 62. NAME 63. STREET ADDRESS 63. STREET ADDRESS IV-ST-ZIP S4. CTY-ST-ZIP AL Increase 63. STREET ADDRESS IV-ST-ZIP S4. CTY-ST-ZIP AL 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 an effe | Pursuant office or r agent. a IGNATURE C LE ME REET ADDRESS IY- ST-ZIP LE ME REET ADDRESS IY- ST-ZIP | registered agent, or bott im familiar with, and acc signature, typed or printed nem (PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLEE 1809 BRICKELL AV MIAMI, FL 00000 | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | . Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS | is, the above-named conthorized by the corporation idea Statutes. Registered Agent signature required in the corporation of th | ed when reinstatling) | FL ose of changing its appointment as reported as | registered gistered |
| LE DELETE 4.1 TTLE Change Addition ME 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS Y-ST-ZIP 4.4 CTY-ST-ZIP | LE DELETE 4.1 TTLE Change Addition ME 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS Y: ST. ZIP 44 CITY-ST. ZIP Change Addition LE DELETE 5.1 TTLE Change Addition ME 52 NAME 53 STREET ADDRESS Addition KEET ADDRESS 53 STREET ADDRESS 53 STREET ADDRESS Addition Y. ST. ZIP 54 CITY-ST. ZIP Change Addition LE DELETE 61 TTTLE Change Addition KEET ADDRESS 54 CITY-ST. ZIP Change Addition LE DELETE 61 TTTLE Change Addition KEET ADDRESS 54 CITY-ST. ZIP Change Addition K. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07((| Pursuant office or r agent. I a IGNATURE Construction IGNATURE Construction IGNATURE Construction IGNATURE Construction Construction | egistered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLEI 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | . Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS | is, the above-named contributized by the corporation is a Statutes. Registered Agent signature required to the corporation of t | ed when reinstatling) | FL ose of changing its appointment as reported as | registered gistered |
| REET ADDRESS REET ADDRESS A4 CITY-ST-ZIP A43 STREET ADDRESS A4 CITY-ST-ZIP AE ADDRESS A44 CITY-ST-ZIP AE ADDRESS A53 STREET ADDRESS A54 CITY-ST-ZIP AE AE ADDRESS AE ACTIY-ST-ZIP AE AE ADDRESS ACTIY-ST-ZIP AE AE ADDRESS ACTIY-ST-ZIP AE ADDRESS ACTIY AE ADDRESS ACTIY AE A | REET ADDRESS 43 STREET ADDRESS NY-ST-ZIP | Pursuant office or r agent. a IGNATURE IGNATURE IGNATUR | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | . Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS | is, the above-named contributized by the corporation Statutes. Registered Agent signature required to the corporation of the c | ed when reinstatling) | FL ose of changing its appointment as reported as | registered gistered |
| Y-ST-ZIP 44 CITY-ST-ZIP LE DELETE 5.1 TITLE Change ME 52 NAME REET ADDRESS 53 STREET ADDRESS Y-ST-ZIP 54 CITY-ST-ZIP LE DELETE 6.1 TITLE LE DELETE 6.1 TITLE ME 6.3 STREET ADDRESS REET ADDRESS 6.3 STREET ADDRESS Y-ST-ZIP 6.3 STREET ADDRESS | Y-ST-ZIP 44 CITY-ST-ZIP LE DELETE S1 TITLE Change ME 52 NAME REET ADDRESS 53 STREET ADDRESS Y-ST-ZIP 54 CITY-ST-ZIP LE DELETE S1 TITLE Change Y-ST-ZIP 54 CITY-ST-ZIP LE DELETE ME 61 TITLE ME 62 NAME REET ADDRESS 63 STREET ADDRESS Y-ST-ZIP 54 CITY-ST-ZIP A. 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 ooth; that I am an indicated on this annual report or supplemental annual report is the and accurate and that my signature shall have the same legal effect as if made under ooth; that I am an indicated on this annual report or supplemental annual report is the and accurate and that my signature shall have the same legal effect as if made under ooth; that I am an indicated on this annual report or supplemental annual report is the and accurate and that my signature shall have the same legal effect as if made under ooth; that I am an an indicated on this annual report or supplemental annual report is the and accurate and that my signature shall have the same legal effect as if made under ooth; that I am an an indicated on | Pursuant office or r agent. a IGNATURE | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori ppplicable. (NOTE: TORS DELETE | is, the above-named con thorized by the corporat ida Statutes. Registered Agent signeture requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | ed when reinstatling) | FL ose of changing its appointment as ref ATE RS AND DIRECTO Change | registered gistered PRS IN 12 Addition |
| LE DELETE 5.1 TTLE Change Addition ME 52 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS REET ADDRESS 5.4 CTY-ST-ZIP Change Addition LE DELETE 6.1 TTLE Change Addition ME 6.1 TTLE Change Addition ME 6.3 STREET ADDRESS Change Addition ME 6.3 STREET ADDRESS Change Addition NE 6.3 STREET ADDRESS Change Addition Y-ST-ZIP 6.4 CTY-ST-ZIP Change Change Change | LE DELETE 51 TITLE Change Addition ME 52 NAME 53 STREET ADDRESS 53 STREET ADDRESS KY-ST-ZIP 54 CITY-ST-ZIP Change Addition LE DELETE 61 TITLE Change Addition ME 61 TITLE Change Addition ME 63 STREET ADDRESS 63 STREET ADDRESS Addition KE 63 STREET ADDRESS 64 CITY-ST-ZIP Change Addition ME 63 STREET ADDRESS 64 CITY-ST-ZIP Change Addition V-ST-ZIP 54 CITY-ST-ZIP 54 CITY-ST-ZIP Change Addition ME 63 STREET ADDRESS 64 CITY-ST-ZIP Change Addition V-ST-ZIP 54 CITY-ST-ZIP 54 CITY-ST-ZIP Change Addition 4. 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 an 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 | Pursuant office or r agent. a IGNATURE IGNATURE IGNATUR | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori ppplicable. (NOTE: TORS DELETE | is, the above-named contriburized by the corporation is statutes. Registered Agent signature required to the corporation of th | ed when reinstatling) | FL ose of changing its appointment as ref ATE RS AND DIRECTO Change | registered gistered PRS IN 12 Addition |
| ME 52 NAME 52 NAME 5.3 STREET ADDRESS 5.4 CTTY-ST-ZIP 5.4 CTTY-ST-ZIP Change Addition 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CTTY-ST-ZIP 6.4 CTTY-ST-ZIP 6.4 CTTY-ST-ZIP 6.4 CTTY-ST-ZIP 6.4 CTTY-ST-ZIP | ME 52 NAME REET ADDRESS 5.3 STREET ADDRESS Y-ST-ZIP 54 CITY-ST-ZIP LE DELETE 6.1 TITLE Change ME 6.2 NAME REET ADDRESS 6.3 STREET ADDRESS Y-ST-ZIP 6.3 STREET ADDRESS ME 6.3 STREET ADDRESS Y-ST-ZIP 6.3 STREET ADDRESS Y-ST-ZIP 6.4 CITY-ST-ZIP 4. Thereby 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 ooth; that I am an office or director of the correction certify that the information as required by Chapter E17. Florida Statutes. I mut name appears in not stated the same legal effect as if made under ooth; that I am an appears in not state and that my signature shall have the same legal effect as if made under ooth; that an an appears in not state and that my signature shall have the same legal effect as if made under ooth; that I am an appears in not state and that my signature shall have the same legal effect as if made under ooth; that I am an appears in not state and that my signature shall have the same legal effect as if made under ooth; that I am an appears in not state and that my signature shall have the same legal effect as if made under ooth; that I am an an appears in not state and that my signature shall have the same legal effect as if made under ooth; that I a | Pursuant office or r agent. I a IGNATURE IGNATURE REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS REET ADDRESS | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori ppplicable. (NOTE: TORS DELETE | is, the above-named conthorized by the corporat ida Statutes. Registered Agent signeture require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS | ed when reinstatling) | FL ose of changing its appointment as ref ATE RS AND DIRECTO Change | registered gistered PRS IN 12 Addition |
| S4 CITY-ST-ZIP S4 CITY-ST-ZIP LE DELETE 6.1 TITLE Delete ME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS YY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP | S4 CITY-ST-ZIP S4 CITY-ST-ZIP LE DELETE BE 6.1 TITLE ME 6.2 NAME REET ADDRESS 6.3 STREET ADDRESS YY-ST-ZIP S4 CITY-ST-ZIP | Pursuant office or r agent. a IGNATURE | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS DELETE | is, the above-named contriburized by the corporat ithorized by the corporat dia Statutes. Registered Agent signeture require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | ed when reinstatling) | FL ose of changing its appointment as repointment as repointm | registered gistered PRS IN 12 Addition |
| Instruct DELETE 6.1 TITLE Delete Change Addition ME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CTY-ST-ZIP 6.4 CTY | ILE IDELETE DELETE DEL | Pursuant office or r agent. I a IGNATURE | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS DELETE | is, the above-named contriburized by the corporation it brized by the corporation is a statutes. Registered Agent signature required in the corporation is a statute set of the corporation is a statute set of the corporation is a structure of t | ed when reinstatling) | FL ose of changing its appointment as repointment as repointm | registered gistered PRS IN 12 Addition |
| ME 62 NAME REET ADDRESS Y-ST-ZIP 64 CITY-ST-ZIP | ME 62 NAME REET ADDRESS Y-ST-ZIP 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 effect or director of the corporation or the receiver or trustee empowered to axecure this report by Section 119.07(3)(i). Florida Statutes. I further certify that the information effect or director of the corporation or the receiver or trustee empowered to axecure this report parts for Florida Statutes; and that my name appears in | Pursuant office or r agent. I a IGNATURE IE ME REET ADDRESS Y-ST-ZIP IE ME REET ADDRESS Y-ST-ZIP IE ME REET ADDRESS Y-ST-ZIP IE ME REET ADDRESS Y-ST-ZIP IE ME REET ADDRESS Y-ST-ZIP IE ME REET ADDRESS | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS DELETE | is, the above-named conthorized by the corporat ida Statutes. Registered Agent signeture required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 6.3 STREET ADDRESS | ed when reinstatling) | FL ose of changing its appointment as repointment as repointm | registered gistered PRS IN 12 Addition |
| 6.4 CITY-ST-ZIP | TY-ST-ZIP 4. 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 raceive are not accurate this report as required by Chapter 617. Florida Statutes: and that my hame appears in | Pursuant office or r agent. a liGNATURE IdNATURE Z. ILE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS DELETE | is, the above-named conthorized by the corporat ithorized by the corporat dia Statutes. Registered Agent signeture requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | ed when reinstatling) | FL cose of changing its appointment as repaintment as repaint as repaintment as repaintment as repaintment | registered gistered PRS IN 12 Addition Addition |
| | 4. 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 effect or director of the composition of the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes: and that my name appears in | Pursuant office or r agent. a BIGNATURE Construction Constred Construction Construction Construction Constru | registered agent, or bott signature, typed or printed nem PD MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLER 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS DELETE | is, the above-named conthorized by the corporat ida Statutes. Registered Agent signeture required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | ed when reinstatling) | FL cose of changing its appointment as repaintment as repaint as repaintment as repaintment as repaintment | registered gistered PRS IN 12 Addition Addition |
| | officer or director of the comporation or the receiver or fustee empowered to execute this report as required by Chapter 517. Florida Statutes; and that my name appears in | Pursuant office or r agent. a IGNATURE Construction Cons | registered agent, or bott signature, typed or printed nem MADDEN, THOMAS 118 NE 2ND ST MIAMI,FL 00000 STD PHILLIPS, KATHLEI 1809 BRICKELL AV MIAMI, FL 00000 VPD HURTAK, JOHN 525 NE 58TH ST MIAMI,FL 00000 | n, in the State of Florida cept the obligations of, S ne of registered egent and title if a DFFICERS AND DIREC DFFICERS AND DIREC EN EN /E #1502 | Such change was au Section 617.0503, Flori Inpplicable. (NOTE: TORS DELETE | is, the above-named conthorized by the corporat ida Statutes. Registered Agent signeture require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS | ed when reinstatling) | FL cose of changing its appointment as repaintment as repaint as repaintment as repaintment as repaintment | registered gistered PRS IN 12 Addition Addition |