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

NONPROFIT.

SIGNATURE:

May 15 1997 8:00am CORPORATION Sandra B. Mor ANNUAL REPORT Secretary of State Secretary of St DIVISION OF CORPO NONS 1997 DOCUMENT # 768933 (4)AVENTURA MALL MARKETING FUND, INC. Principal Place of Business Mailing Address % TED SIEGAL % TED SIEGAL 19501 BISCAYNE BLVD. 19501 BISCAYNE BLVD. N MIAMI BEACH FL 33180-2324 N MIAMI BEACH FL 33180 3. Date Incorporated or Qualified 3a. Date of Last Report 06/08/1983 07/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2298541 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SIEGAL, TED 82 Street Address (P.O. Box Number is Not Acceptable) 19501 BISCAYNE BLVD. 83 N MIAMI BEACH FL 33180 RA City 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 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 617.0503, Florida Statutes. (NOTE: Registered Agent signature required when re-instating) Signature, typed or printed name of registered agont and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRLCTORS IN 12 12 13. DELETE 11 TITLE Change Addition TITLE Ď 1.2 NAME NAME SIEGAL, TED 19501 BISCAYNE BLVD. STREET ADDRESS 1.3 STREET ADDRESS N MIAMI BCH. FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition FEIMSTER, CAROLYN 2.2 NAME 19501 BISCAYNE BLVD STREET ADDRESS 2.3 STREET ADDRESS N MIAMI BCH,F L 00000 2. 4 CITY - ST - 7IP CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME KEEF, JOHN R 19501 BISCAYNE BLVD 3.3 STREET ADDRESS STREET ADDRESS N MIAMI BCH. FL 11Y - \$1 - 7IP CITY-ST-7IP DELETE TITLE 411 Change Addition NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELETE TITLE 51 Change Addition NAME 5.2 EET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 ( - \$1 - ZIP DELETE Change TITLE Addition NAME 6.3 T ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and emption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the urate and that my signature shall have the same legal effect as if made under eath; that oute this report as required by Chapter 617, Florida Statutes; and that my name I am an officer or director of the corporation or the receiver or trystee empowered to appears in Block 12 or Block 18 if changed, or on an attachment with an address.

F STATE

FLORIDA DEPARTMEN

**FILED** 

4-29-97