

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
FILED**

95 APR 27 AM 10:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 810843 (3)

1. Corporation Name  
**BISCAYNE SEA CLUB**

Principal Place of Business Mailing Address

8000 E DRIVE NORTH BAY VILLAGE MIAMI BEACH FL 33141

8000 E DRIVE NORTH BAY VILLAGE MIAMI BEACH FL 33141

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		2b		02/28/1956	03/25/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		59-0787519	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
JAFJE, LEAH S 8000 EAST DR, APT 106 N. BAY VILLAGE FL 33141				<input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent				7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
81 Name				<input type="checkbox"/> Yes <input type="checkbox"/> No	
82 Street Address (P.O. Box Number is Not Acceptable)					
83					
84 City				FL 85 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, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature: typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when resigning.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>JAFJE, LEAH S.</del> WANDA GIUDICI	1.2 NAME	
STREET ADDRESS	8000 EAST DR #106 305	1.3 STREET ADDRESS	
CITY - ST - ZIP	N BAY VILLAGE, FL 00000	1.4 CITY - ST - ZIP	
TITLE	P	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHESLEY, JOSEPHINE	2.2 NAME	
STREET ADDRESS	8010 E. DR. #307	2.3 STREET ADDRESS	
CITY - ST - ZIP	N. BAY VILLAGE FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAICEDO, HARRY	3.2 NAME	
STREET ADDRESS	8010 E. DR. #207	3.3 STREET ADDRESS	
CITY - ST - ZIP	N. BAY VILLAGE FL	3.4 CITY - ST - ZIP	
TITLE	DT	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOLWAY, MARJORIE	4.2 NAME	
STREET ADDRESS	8000 E. DR. #103 APT 305 8020 EAST DR #117	4.3 STREET ADDRESS	
CITY - ST - ZIP	N. BAY VILLAGE FL	4.4 CITY - ST - ZIP	
TITLE	D VP	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENABIB, ELIAS	5.2 NAME	
STREET ADDRESS	8010 E. DR. #201	5.3 STREET ADDRESS	
CITY - ST - ZIP	N. BAY VILLAGE FL	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LACKOWYN, WILLIAM	6.2 NAME	
STREET ADDRESS	8010 E. DR. #309 APT. 108	6.3 STREET ADDRESS	
CITY - ST - ZIP	N. BAY VILLAGE FL	6.4 CITY - ST - ZIP	

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 110.07(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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wanda L. Giudici Date: April 14, 1995 (30) 756-7813

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR