

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 811603 (0)

1. Corporation Name
CORAL SEA TOWERS INC

Principal Place of Business 10300 W BAY HARBOR DR BAY HARBOR ISLAND MIAMI BEACH FL 33154	Mailing Address 10300 W BAY HARBOR DR BAY HARBOR ISLAND MIAMI BEACH FL 33154
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/09/1957	
4. FEI Number 59-0824348	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent GOLDBERG, MAX M 10300 W BAY HARBOR DR MIAMI BEACH FL 33154		10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City
		85 Zip Code	FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
NAME	SHNEIDER, PHILIP	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
STREET ADDRESS	10300 W BAY HARBOR DR. #6A	2.1 TITLE	2.2 NAME
CITY-ST-ZIP	MIAMI BEACH FL 33154	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE	VP	3.1 TITLE	3.2 NAME
NAME	SCHMELZER, KURT	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
STREET ADDRESS	10300 W BAY HARBOR DR	4.1 TITLE	4.2 NAME
CITY-ST-ZIP	MIAMI BEACH FL 33154	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	JORDAN, GLADYS	5.1 TITLE	5.2 NAME
NAME	10300 W BAY HARBOR DR	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
STREET ADDRESS	MIAMI BEACH FL 33154	6.1 TITLE	6.2 NAME
CITY-ST-ZIP		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
TITLE	S		
NAME	GOLDBERG, MAX		
STREET ADDRESS	10300 W BAY HARBOR DR		
CITY-ST-ZIP	MIAMI BEACH FL 33154		
TITLE	D		
NAME	LAVINE, ALBERT		
STREET ADDRESS	10300 W BAY HARBOR DR		
CITY-ST-ZIP	MIAMI BEACH FL 33154		
TITLE	D		
NAME	FISHMAN, WINIFRED		
STREET ADDRESS	10300 W BAY HARBOR DR		
CITY-ST-ZIP	MIAMI BEACH FL 33154		

14. 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 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:

Max M. Goldberg Secretary 1-29-98

CR2E034 (10/97)