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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F15922

(0)

2600 DEVELOPERS, INC.

| Principal Place of Business | | | | Mailing Address | | | | | t chatten timt times nation libite trails simi | 41311 9791) 611 | .e. Bibsi albii | , 61614 1854 |
|--|---|---|--|--|-----------------------|--------------------------|---------------------|---------------|---|-------------------------|-------------------------|-----------------------------|
| 2770 N.E. 187 STREET NORTH MIAMI BEACH FL 33180 | | | | 2770 N.E. 187 STREET NORTH MIAMI BEACH FL 33180-2919 | | | | | | | | |
| | | | | | | | | - | 5.1.1.5.1.5.1.5.1. | 12. 5. | | |
| | | | | | | | | 3 | Date Incorporated or Qualified 01/23/1981 | | of Last R 0/1996 | leport |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | 4 | , FEI Number | | | pplied For |
| Suite Ant # ate | | | | Suite, Apt. #, etc. | | | | | 59-2569554 | | | ot Applicable |
| Suite, Apt #, etc. | | | | 27 | | | | 5 | . Certificate of Status Desired | | | Additional equired |
| City & State | | | | City & State | | | | R | . Election Campaign Financing | | | May Be |
| 23 | | | 28 | | | | | " | Trust Fund Contribution | | | to Fees |
| Zip | | Country | Z | ip | L co | ountry | | В | . This corporation has liability for i | ntangible ta | x under s | . 199.032, |
| 24 | | 25 | 29 | | 30 | | | | | Yes 🔲 | | |
| | | and Address of Curr | ent Register | red Agent | | 81 | Mama | 10 | , Name and Address of New Re | pistered A | <u>jent</u> | |
| | | PAULETTE | | | | 0' | Name | | | • | | |
| | | H TERRACE | | | | 82 | Street | Address (| P.O. Box Number is Not Acceptab | le) | · | |
| NN | MIAMI REAL | CH FL 33179 | | | | 83 | · | | | | | |
| | | | | | | | | | | | | |
| | | | | | | 84 | City | | | Ei | 85 Zip | Code |
| 11. Pursuant office or agent. La | to the provis registered ag am familiar w | sions of Sections 607.09 gent, or both, in the Sta ith, and accept the obli | 502 and 607 te of Florida igations of, 5 | .1508, Florida State . Such change was Section 607.0505, F | utes, the authoriz | above ed by atutes | e-named the corp | corporation's | on submits this statement for the p board of directors. I hereby accep | urpose of cot the appoi | hanging it ntment as | ts registered registered |
| SIGNATURE | | | | | | | | | | | | |
| | Signature type: | d or printed name of registered a | | | | | erutengia tn | required whe | | DATE | | |
| 12. | Т Б | OFFICERS A | ND DIRECT | ORS DELETE | 13 | - | | I | ADDITIONS/CHANGES TO OFFIC | | | RS IN 12 Addition |
| TITLE NAME | BESSO, | RENEE | | F" DETENT | | TITLE | | | | i. | Change | L Mudition |
| STREET ADDRESS | | E 214 TERRACE | | | | NAME | Abborce | | | | | |
| CITY-ST-ZIP | | N BEACH FL | | | | CITY-S | ADDRESS | | | | | |
| TITLE | V V | W 000 (011 1 0 | | DELETE | | TITLE | 1. Tit. | | | Ι | Change | Addition |
| NAME | WAGEN | Berg, Evelyn | | _ | | NAME | | | | | | |
| STREET ADDRESS | | 214 ST | | | | | ADDRESS | | | • | | |
| CITY - ST - ZIP | N. MIAN | 11 BEACH FL | | | | CITY-S | | | | | | |
| THTLE | VS | | | DELETE | | TITLE | | | ······································ | Τ. | Change | Addition |
| NAME | | Berg, Paulette | | | 3.2 | NAME | | | | | | |
| STHEET ADDRESS | | 214 TERRACE | | 1 | 3.3 | STREET | address | | | | Si | |
| CHY-ST-ZIP | N. MIAN | II BEACH FL | | | 3.4. | CITY-S | ST-ZIP | | | | | |
| TOTE | | | | ☐ DELETE | 4.1 | TITLE | | | | . [| Change | Addition |
| NAME | | | | | 4. 2 | NAME | | | | | | |
| STREET ADDRESS | | | | | 4.3 | STREET | address | | | | | |
| CITY - S* - ZIP | | | | | | CITY-S | T-ZIP | | | | | |
| TITLE | | | | DELETE | | TITLE | | | | L | Change | Addition Addition |
| NAME | | | | | | NAME | | | | | | |
| STREET ADDRESS | | | | | | | ADDRESS | 1 | | | | |
| CITY - ST - ZiP | ļ | | | DELETE | | CITY - S | T - ZIP | | | Г | Change | Addion |
| THEE NAME | | | | וייין אניניונ | | TITLE | | 1 | | L | The results | LJ Addition |
| STREET ADDRESS | | | | | | NAME | ADDRESS - | | | | | |
| City, QT, 7IP | | | | | | DINEE! | |] | | | | |

14. I do 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 Florida Statutes.

SIGNATURE:

(RENEE BESSO) president 2/11/97

FILED

Feb 21 1997 8:00am

Secretary of State