

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000003915 (5)

1. Corporation Name

BLM EB MIAMI, INC.



Principal Place of Business

4243 DUNWOODY CLUB DR.
SUITE 200
DUNWOODY GA 30350-5206
US

Mailing Address

4243 DUNWOODY CLUB DR.
SUITE 200
DUNWOODY GA 30350-5206
US

3. Date Incorporated or Qualified
07/27/1994

3a. Date of Last Report
01/17/1995

2. Principal Place of Business

21 4243 DUNWOODY CLUB DR.

2a. Mailing Address

26 4243 DUNWOODY CLUB DR.

4. FEI Number

58-2023755

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

Suite, Apt. #, etc.

22 SUITE 200

Suite, Apt. #, etc.

27 SUITE 200

City & State

23 ATLANTA, GA

City & State

28 ATLANTA, GA

Zip

24 30350-5206

Country

25 USA

Zip

29 30350-5206

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
SUITE 105
1201 HAYS STREET
TALLAHASSEE FL 32301

81 Name

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

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE
NAME COLLINS, DOUGLAS C
STREET ADDRESS 4243 DUNWOODY CLUB DRIVE, SUITE 200
CITY-ST-ZIP DUNWOODY GA 30350

TITLE V ☒ DELETE
NAME FAIR, MARK G
STREET ADDRESS 4243 DUNWOODY CLUB DRIVE, SUITE 200
CITY-ST-ZIP DUNWOODY GA 30350

TITLE S ☐ DELETE
NAME LEE, ROBERT B
STREET ADDRESS 4243 DUNWOODY CLUB DRIVE, SUITE 200
CITY-ST-ZIP DUNWOODY GA 30350

TITLE C ☐ DELETE
NAME MILLER, ROBERT M
STREET ADDRESS C/O BERLACK ISRAELS/120 W 45TH ST
CITY-ST-ZIP NEW YORK NY 10036

TITLE D ☐ DELETE
NAME STERN, WILLIAM
STREET ADDRESS 200 EAST 57TH STREET, SUITE 10-F
CITY-ST-ZIP NEW YORK NY 10022

TITLE D ☐ DELETE
NAME WAGNER, LEON
STREET ADDRESS 11150 SANTA MONICA BLVD SUITE 305
CITY-ST-ZIP LOS ANGELES CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T/D ☒ Change ☐ Addition
1.2 NAME COLLINS, DOUGLAS C.
1.3 STREET ADDRESS 4243 DUNWOODY CLUB DR., SUITE 200
1.4 CITY-ST-ZIP ATLANTA, GA 30350-5206

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE V/S ☒ Change ☐ Addition
3.2 NAME LEE, ROBERT B.
3.3 STREET ADDRESS 4243 DUNWOODY CLUB DR., SUITE 200
3.4 CITY-ST-ZIP ATLANTA, GA 30350-5206

4.1 TITLE C ☒ Change ☐ Addition
4.2 NAME MILLER, ROBERT M.
4.3 STREET ADDRESS 525 E. 80TH ST., APT. 8B
4.4 CITY-ST-ZIP NEW YORK, NY 10021

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE D ☒ Change ☐ Addition
6.2 NAME WAGNER, LEON M.
6.3 STREET ADDRESS 1325 AVE. OF THE AMERICAS, 22ND FLOOR
6.4 CITY-ST-ZIP NEW YORK, NY 10019

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 119.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-11-96 770-393-2662

CR2E034 (12/95)