

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 31 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 # F95000005409 (6)
1. Corporation Name

ONCE UPON A TIME IN THE WEST SOUTH BEACH, INC.



Principal Place of Business

Mailing Address

504 NW 77TH ST., #202
BOCA RATON FL 33487

504 NW 77TH ST., #202
BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/03/1995

4. FEI Number

65-0592462

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 1265 WASHINGTON AVE

26 2400 N. COPANS RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State MIAMI BEACH, FLORIDA

27 BAY 10
28 ROMANO BEACH, FLORIDA

23 Zip 33139 Country USA

29 Zip 33069 Country USA

9. Name and Address of Current Registered Agent

REVAH, MARCO
504 NW 77TH ST., #202
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name REVAH, MARCO
82 Street Address (P.O. Box Number is Not Acceptable) 2400 N. COPANS ROAD
83 BAY 10
84 City ROMANO BEACH FL 85 Zip Code 33069

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

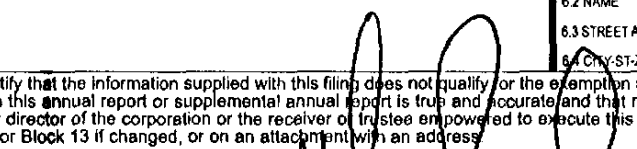
12. OFFICERS AND DIRECTORS

TITLE	PVST	<input type="checkbox"/> DELETE
NAME	REVAH, MARCO	
STREET ADDRESS	504 NW 77TH ST., #202	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	REVAH, MARCO	
STREET ADDRESS	504 NW 77TH ST., #202	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	2400 N. COPANS RD, BAY 10
1.4 CITY-ST-ZIP	ROMANO BEACH, FL 33069
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	2400 N. COPANS RD, BAY 10
2.4 CITY-ST-ZIP	ROMANO BEACH, FL 33069
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	800002631558
5.4 CITY-ST-ZIP	-09/02/98--01066--049
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	***150.00
6.4 CITY-ST-ZIP	

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: 

CR2E034 (5/98)

ONCE UPON A TIME IN THE WEST,
SOUTH BEACH INC.

2400 WEST COPANS, BAY #10,
POMPANO BEACH, FLORIDA 33069
TEL: (954) 977-7244 FAX: (954) 977-4247

P82

July 10, 1998

**SUPERVISOR
ANNUAL REPORTS FILINGS
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314**

Dear Sir,

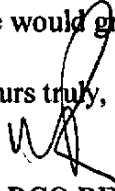
RE: 1998 PROFIT CORPORATION ANNUAL REPORT

Enclosed, please find a check in the amount of \$150.00 for the filing fees of the 1998 Profit Corporation Annual Report. We received these reports to fill out for the first time today even though they are marked "2nd Notice". We would greatly appreciate it if you could allow the \$150.00 to be the filing fee for this report since we did not receive it originally back in January like we were suppose to. This may be due to the fact that we moved at the end of December.

We now have noted that we should receive these reports to file in January and will look out for them in the coming years. We had a bookkeeper looking after all the government paper work and she did not tell us that we did not receive it.

We would greatly appreciate your cooperation in this matter, we remain,

Yours truly,



MARCO REVAH