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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001219 (2)

OCEAN VISTA HOLDINGS COMPANY

Principal Place of Business Mailing Address 1500 SAN REMO AVE 1500 SAN REMO AVE SUITE 237 SUITE 237 CORAL GABLES FL 33146-3047 CORAL GABLES FL 33146-3047 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/08/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 12908 Air Way Street 65-0595592 21 12908 Air Way Street Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Panama City, Florida Panama City, Florida 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 32404-2833 24 32404-2833 25 US US Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HUGHEY, BONNIE J Judith C. Young 1500 SAN REMO AVE Street Address (P.O. Box Number is Not Acceptable)
12908 Air Way Street 82 **SUITE 239 CORAL GABLES FL 33146** 63 2ip Code 32404-2833 84 City Panama City, 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 (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIFFCTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE CAWSAND LIMITED NAME 12 NAME ANSBACHER HOUSE, DOCTOR ROY'S DR STREET ADDRESS 1.3 STREET ADDRESS GRAND CAYMAN, CAYMAN ISLANDS CITY+ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE **CROMER LIMITED** NAME 2.2 NAME ANSBACHER HOUSE, DOCTOR ROY'S DR STREET ADDRESS 2.3 STREET ADDRESS GRAND CAYMAN, CAYMAN ISLANDS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PARKER LIMITED 32 NAME NAME ANSBACHER HOUSE, DOCTOR ROY'S DR STREET ADDRESS 3.3 STREET ADDRESS GRAND CAYMAN, CAYMAN ISLANDS CITY-ST-ZIP 3.4. CITY-ST-2IP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 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 supplied untal 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 of th

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY - ST-ZIP

DELETE

DELETE

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Authorized Signatory April 3, 1948 8508713750

Change

Change

Addition

☐ Addition

FILED

Apr 09 1998 8:00am

Secretary of State