

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

5/5/2003-90869-001-\$450.00-\$150.00

0847720 AT

DOCUMENT # F98000004057

1. Entity Name
BOYKIN MIAMI II, INC.



FILED

03 JUN 16 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
1500 GUILD HALL
45 W. PROSPECT
CLEVELAND OH 44115

Mailing Address
1500 GUILD HALL
45 W. PROSPECT
CLEVELAND OH 44115

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 34-1920361

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PAS
NAME BOYKIN, WILLIAM H ☒ Delete
STREET ADDRESS 45 W. PROSPECT
CITY-ST-ZIP CLEVELAND OH

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST
NAME BOYKIN, CAROL B ☐ Delete
STREET ADDRESS 45 W. PROSPECT
CITY-ST-ZIP CLEVELAND OH

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VAS
NAME BOYKIN, ROBERT.W ☐ Delete
STREET ADDRESS 45 W. PROSPECT
CITY-ST-ZIP CLEVELAND OH

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME BOYKIN, WILLIAM J ☐ Delete
STREET ADDRESS 45 W. PROSPECT
CITY-ST-ZIP CLEVELAND OH

TITLE PSD ☒ Change ☐ Addition
NAME Boykin, William J.
STREET ADDRESS 45 W. Prospect
CITY-ST-ZIP Cleveland, OH 44115

TITLE VAS
NAME BOYKIN, JOHN E ☐ Delete
STREET ADDRESS 45 W. PROSPECT
CITY-ST-ZIP CLEVELAND OH

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John E. Boykin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/03

(216) 430-1200

Date

Daytime Phone #

CR2ED034 (10/02)