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

CITY-ST-ZIP

Block 12 or Block 13 if

changed, or on an attachment with an address

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Jul 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1**9**98 DOCUMENT # G65783 (4) MIAMI SHORES LEASING, INC. Principal Place of Business Mailing Address 8880 BISCAYNE BOULEVARD 8880 BISCAYNE BLVD MIAMI SHORES FL 33138-0343 MIAMI SHORES FL 33138 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 10/19/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2338399 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ 23 Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes No. e, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FERDIE, AINSLEE 717 PONCE DE LEON BLVD, S-215 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 84 City Zip Code 85 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 harrie of registered agent and title it approximate (NOTE Registered Agent signature required when re-natating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TILLE TITLE WILDSTEIN, LARRY NAME 1.2 NAME 8880 BISCAYNE BLVD. STREET ADDRESS 1.3 STREET ADDRESS MIAMI SHORES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 THILE WILDSTEIN, DIANE NAME 2.2 NAME 8880 BSICAYNE BLVD. 2.3 STREET ADDRESS STREET ADDRESS **MIAMI SHORES FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change Addition TiTL€ 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change Addition TITLE 900002581139 NAME 5.2 NAME -07/07/98--01010--043 5.3 STREET ADDRESS STREET ADDRESS \*\*\*150.00 5.4 CITY-ST-ZIP CITY-ST-ZIP DELFTE 6.1 TILLE Change ■ Addition TITLE 900002581139 NAME 62 NAME -07/07/98--01010--042 63 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby 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 eath; 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

\*\*\*400.00

**FILED**