

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # J18699

(5)

1. Corporation Name

DCA AT WIGGINS BAY, INC.



Principal Place of Business

**700 N.W. 107TH AVE
4TH FLOOR
MIAMI FL 33172**

Mailing Address

**700 N.W. 107TH AVE
4TH FLOOR
MIAMI FL 33172**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**WATSKY, MORRIS J., ESQ.
700 NW 107TH AVENUE
MIAMI FL 33172**

3. Date Incorporated or Qualified

06/10/1986

3a. Date of Last Report

05/01/1995

4. FET Number

59-2691586

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

10. Name and Address of New Registered Agent

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 date of appointment

(NOTE: Registered Agent signature required when translating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DC

**MILLER, LEONARD
700 NW 107TH AVE
MIAMI FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VD

**BOLOTIN, IRVING
700 NW 107TH AVE
MIAMI FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

**MILLER, STUART A.
700 NW 107TH AVE
MIAMI FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

AS

**SIERRA, E. KATHLEEN
700 NW 107TH AVE
MIAMI FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD

**COLE, ROBERT B.
700 NW 107TH AVE
MIAMI FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TV

**SALEDA, M.E.
700 NW 107TH AVE
MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

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☐ Change

☐ Addition

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:

Kathleen E. Sierra Kathleen E. Sierra

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4/8/96

(305) 229-6400

Daytime Phone #

CR2E034 (12/95)