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 # K44430

(2)

FILED	
Feb 02 1998 8:00am	1
Secretary of State	

SOUTH	H MIAMI-62ND PLACE, INC.				
					11
Division I Divis	10	44-01			
1 '	e of Business	Mailing Address			
50 W MASHT SUITE 5	IA UHIVE	50 W MASHTA DRIVE SUITE 5			
KEY BISCAY	NE FL 33149	KEY BISCAYNE FL 33149		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				11/08/1988	
	Place of Business	2a, Mailing Address		4. FEI Number Applied Fo	
21	-	26		65-0085699 Not Applic	
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Regulred	ie l
22 City & Stat		City & State			
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	' 1
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	$\neg \neg$
24	25	29 3	0	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
	DBER CORPORATE AGENTS INC		81 Name		
	01 SO. BAYSHORE DRIVE		82 Street	Address (P.O. Box Number is Not Acceptable)	\neg
	TH FL.				\dashv
į Mi	AMI FL 33133		83		1
ŀ			84 City	FL 85 Zip Code	
dd Diverse	to the provisions of Sections CO7 0500	and CO7 1500. Florida Ctalutas	the above named	corporation submits this statement for the purpose of changing its register	orod .
office or r	registered agent, or both, in the State o	f Florida Such change was auf	, the above-hamed thorized by the corp	poration's board of directors. I hereby accept the appointment as register	ed
agent. I s	ım familiar with, and accept the obligati	ons of, Section 607.0505, Florid	da Statutes.		
SIGNATURE	Signature, typed or printed name of registered agent	and title if anoticable (NOTE, I	Begistered Agent signature	required when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	DELETE	1.1 TITLE	Change Add	dition
NAME	London, I. Edward		1.2 NAME		-
STREET ADDRESS	50 W. MASHTA DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	KEY BISCAYNE FL		1.4 CITY - ST- ZIP		
TITLE	DVP	☐ DELETE	2.1 TITLE	1.70 L	dition
NAME	BORN, MICHAEL P.		2.2 NAME	MORALES, OSCAR 7300 S.W. 62 M PL 45 Floor SOUTH MIAMI, FL	
STREET ADDRESS	7300 SW 62ND PL, 4TH FLR		2.3 STREET ADDRESS	7300 S.W. 62 1 PL 45 -100r	
CITY-ST-ZIP	SOUTH MIAMI FL	Doutri		SOUTH MIAMI, FL	400
TITLE	DS Hirsch, Nathan	☐ DELET E	3.1 TITLE	Change L Add	ninou
NAME	7300 SW 62ND PL, 3RD FL		3 2 NAME		
STREET ADDRESS	S. MIAMI FL		3.3 STREET ADDRESS		-
CITY-ST-ZIP	DT DT	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	☐ Change ☐ Ado	dition
NAME	SAMIMY, JEAN B.	L_ betel	4. 2 NAME		,,,,,,,,,
STREET ADDRESS	7300 SW 62ND PL, 3RD FL		4.3 STREET ADDRESS		
CITY-ST-ZIP	S. MIAMI FL		4.4 City-St-ZiP		ŀ
TITLE	<u> </u>	DELETE	5.1 TITLE	☐ Change ☐ Ado	dition
NAME		- -	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		;	5.4 City - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Ado	lition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			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 oath; that I am an officer or director of the corporation of the directivity 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 landeress.

SIGNATURE:

89/8/1

205.361.9720