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 # K87744 (4)

1. Corporation Name
LEELAND MARINA VIEW CORP.

Principal Place of Business	Mailing Address
~~3850 S.W. 87TH AVE.~~ ~~SUITE 305~~ ~~MIAMI FL 33165~~ ~~US~~	~~3850 S W 87TH AVEONUE~~ ~~305~~ ~~MIAMI FL 33165~~ ~~US~~

3. Date Incorporated or Qualified: 05/12/1989
3a. Date of Last Report: 04/24/1995

2. Principal Place of Business	2a. Mailing Address
21 10361 SW 13th Street	26 10361 SW 13th Street
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Miami FL	City & State 28 Miami FL
Zip / Country 24 33174 / 25 US.	Zip / Country 29 33174 / 30 US

4. FEI Number: 65-0132987 — 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

9. Name and Address of Current Registered Agent

~~KTG&S REGISTERED AGENT CORPORATION~~
~~100 SE 2ND STREET~~
~~28TH FLOOR~~
~~MIAMI FL 33131~~

10. Name and Address of New Registered Agent

81 Name: Gregg S. Truxton, Esquire
82 Street Address (P.O. Box Number is Not Acceptable): 2121 Ponce de Leon Blvd.
83 Suite 1035
84 City: Coral Gables FL 85 Zip Code: 33134

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: Gregg S. Truxton — DATE: 4/30/96
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent's signature required when changing.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D BUIGAS, O.J. 4200 N. LANDING DR. FT. MYERS FL ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BUIGAS, OCTAVIO D. 3850 S W 87TH AVENUE MIAMI FL ☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D.P. Buigas, Elena R. 10361 SW 13th Street Miami, Fl 33174. ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CLAVIJO, ANA B. 3850 S W 87TH AVENUE MIAMI FL ☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	V.T.S. Clavijo, Ana B. 10361 SW 13th Street Miami Fl 33174. ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/T CARBALLO, MARTHA 3850 S W 87TH AVENUE MIAMI FL ☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CARBALLO, MARTHA 3850 S W 87TH AVENUE MIAMI FL ☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition 600001819745 -05/14/96--01015--012 ***208.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ 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)(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 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: Ana B Clavijo — 4/4/96 (Date) — (305)559-5524 (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ana B. Clavijo

CR2E034 (12/95)