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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 PM 2:27

DOCUMENT # **L45863** (2)

1. Corporation Name

OPEN DOOR PROPERTIES, INC.

Principal Place of Business

Mailing Address

3233 MARY ST
COCONUT GROVE FL 33133

3233 MARY ST
COCONUT GROVE FL 33133

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/22/1990

3a. Date of Last Report

04/18/1994

2. Principal Place of Business

2a. Mailing Address

21 5640 COLLINS AVE

26 5640 COLLINS AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 7C

27 7C

City & State

City & State

23 MIAMI BEACH FL

28 MIAMI BEACH, FL

Zip

Country

Zip

Country

24 33140

25 DADE

29 33140

30 DADE

9. Name and Address of Current Registered Agent

BLYNN, MICHAEL R.
1367 NE 162ND STREET
N. MIAMI BEACH FL 33162

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 title if applicable)

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BLYNN, MICHAEL R.
STREET ADDRESS 1367 NE 162ND ST.
CITY-ST-ZIP N. MIAMI BEACH FL

TITLE D
NAME BIELEY, PEGGY
STREET ADDRESS 3233 MARY STREET
CITY-ST-ZIP COCONUT GROVE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 5640 COLLINS AVE #7C
2.4 CITY-ST-ZIP MIAMI BEACH FL 33140

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if my name is on an amendment with an address.

SIGNATURE:

SIGNATURE AND TITLE OF SIGNING OFFICER OR DIRECTOR

DATE

FILED NUMBER

1/27/95 (005)
861-8765
PEGGY BIELEY