FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995 3.28.95 B.26870

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 28 PM 2:27

DOCUMENT # L70147 (8)

1. Corporation Name

GOLDSEL/RETREAT, INC.

Principal Place of Business: ~~% B & C CORPORATE SERVICES, INC. 175 NW 1ST AVE., SUITE 2000 MIAMI FL 33128-9905~~

Mailing Address: ~~% B & C CORPORATE SERVICES, INC. 175 NW 1ST AVE., SUITE 2000 MIAMI FL 33128-9905~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	05/02/1990
3a. Date of Last Report	02/01/1994
4. FEI Number	65-0195462
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

	2. Principal Place of Business		2a. Mailing Address
21	555 SW 148 AVE	26	201 S. BISCAYNE BLVD.
22	Suite, Apt. #, etc	27	Suite, Apt. #, etc: SUITE 3000
23	City & State: SUNRISE FL	28	City & State: MIAMI, FL
24	Zip: 33325	29	Zip: ~~FL~~ 33131
25	Country: USA	30	Country: USA

9. Name and Address of Current Registered Agent

B & C CORPORATE SERVICES, INC.
~~175 NW 1ST AVE.~~
~~SUITE 2000~~
~~MIAMI FL 33128~~

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable): 201 S. Biscayne Blvd.
83	Suite 3000
84	City: Miami — FL
85	Zip Code: 33131

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 ______________________ DATE ______
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DC
NAME	CASSEL, JAMES S.
STREET ADDRESS	~~175 NW 1ST AVE. #2000~~
CITY-ST-ZIP	~~MIAMI FL 33128-9905~~
TITLE	PD
NAME	GOLDBERG, F. DEE
STREET ADDRESS	1527 RIVERSIDE DRIVE
CITY-ST-ZIP	TARPON SPRINGS FL
TITLE	VP
NAME	GOLDSTEIN, FRED
STREET ADDRESS	6200 ALMOND TERRACE
CITY-ST-ZIP	PLANTAION FL 33317
TITLE	T
NAME	PATTERSON, VICKIE
STREET ADDRESS	555 SW 148TH AVE
CITY-ST-ZIP	SUNRISE FL
TITLE	AS
NAME	SMITH, ALTON
STREET ADDRESS	555 SW 148 AVE
CITY-ST-ZIP	N MIAMI BCH FL
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	201 S. Biscayne Blvd., Suite 3000	
1.4 CITY-ST-ZIP	Miami, FL 33131	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
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)(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: [signature] F. DEE GOLDBERG 3/23/95 (813) 937-4211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0206003 CP