FILED

Feb 17, 1999 8:00am

Secretary of State

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L96641					02-17-1999 90064 003 ****150.00			
1. Corporation Name					1			
JSH PH	OPERTIES, INC.							
	•							
Principal Plac	ee of Business	Mailing Address			<u> </u>		I RIRKI BIRKI BIRKI	
'		•					•	
6324 N. BAY ROAD 6324 N. BAY ROAD MIAMI BEACH FL 33141 MIAMI BEACH FL 33141					*		**.	
						OT WRITE IN TH	S SPACE	
		•			3. Date Incorporated or	Qualifed		
2 Dringing F	None of Dunings	20 14-11: Add			08/29/1990 4. FEI Number			
<u>├</u>		2a. Mailing Address	26		65-0218861			plied For t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	
22		27			5. Certifcate of Status D	esired 🗌	Fee Re	
City & Star	te	City & State	City & State		6. Election Campaign Fir	nancing	\$5.00	May Be
23	28				Trust Fund Contribution	on 🗀	Added t	
Zip	Country Zip Cou			 -	8. This corporation owes			
24	9. Name and Address of Current	29 30	} ∤		Personal Property Tax 10. Name and Address of			□No
	5. Teame and Address of Current	r registered Agent	81	Name	10. Name and Address (or New Registeret	Agent	
RAT	TNER, JOEL S.				· · · · · · · · · · · · · · · · · · ·			
6324 NORTH BAY ROAD			82	Street Add	lress (P.O. Box Number is No	Acceptable)		
MIAMI BEACH FL 33141			83				1 (C) 1 (E)	
·			84	City			85 Zip 0	12 . 41311 .541 20 da 19 1 . 1
,		•		•		FI	<u>-</u> `	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes,	the above	-named com	poration submits this statemen	t for the purpose of	of changing its	registered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florida	Statutes.	u le corporati	ion's board of directors. There	ву ассері ше аррс	millient as re	gistered
SIGNATURE								
12.	Signature, typed or printed name of registered agent OFFICERS AND		gistered Agent	t signature require	ed when reinstating) ADDITIONS/CHANGES	DATE	ND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			70 01110211071	Change	Addition
NAME	RATTNER, JOEL S.		1.2 NAME					
STREET ADDRESS			1.3 STREET ADDRESS				, ÷	
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY-ST	-ZIP				
TITLE	D	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition
NAME	RATTNER, SANDRA		2.2 NAME				j	
STREET ADDRESS				ADDRESS	, :			
CITY-ST-ZIP	MIAMI BEACH FL	☐ DELETE	2. 4 CITY-ST	r-ZIP			. Change	☐ Addition
TITLE NAME	D Rattner, steven M.		3.1 TITLE 3.2 NAME				☐ Change	☐ Addition
STREET ADDRESS:	6324 N. BAY ROAD			ADDRESS	,			.
CITY-ST-ZIP	MIAMI BEACH FL		3.4 CITY-S1		•		北州	急継続!
TITLE			4.1 TITLE				Change	Addition
NAME	RATTNER, JACK B.		4. 2 NAME			÷		
STREET ADDRESS	6324 N. BAY ROAD		4.3 STREET	ADDRESS	•			
CITY-ST-ZIP	MIAMI BEACH FL		4.4 CITY-ST	-ZIP	,		•	
TITLE		DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME	ADDDECO	¥		4.	
STREET ADDRESS			5.3 STREET. 5.4 CITY-ST					
CITY-ST-ZIP TITLE			•	-417				
			6.1 TITLE				Change	
NAME .		☐ DEŁETE					Change	☐ Addition
NAME STREET ADDRESS		□ DECE IE	6.1 IIILE 6.2 NAME 6.3 STREET.				☐ Change	Addition

14. I hereby 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 or the eceiver or tracket the empowered to execute this report as required by Chapter 607. Florida Statutes; and that my same appears in Block 13 if changed, or on an attachment with an additional value of the empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

C/TY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (11/9)