

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # M06699 (6)

95 FEB 14 PM 4: 24

1. Corporation Name

ALVAREZ DEVELOPMENT CO., INC.

Principal Place of Business

Mailing Address

C/O FLORIDA REGISTERED AGENTS, INC.
100 SE 2ND STREET, SUITE 3600
MIAMI FL 33131-2130

C/O FLORIDA REGISTERED AGENTS, INC.
100 SE 2ND STREET, SUITE 3600
MIAMI FL 33131-2130

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

10/19/1984

03/21/1994

4. FEI Number

Applied For

59-2474180

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$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 2601 S. Bayshore Drive

26 2601 South Bayshore Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 1600

27 Suite 1600

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip

Country

Zip

Country

24 33133

25 USA

29 33133

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLORIDA REGISTERED AGENTS, INC.
100 SE 2ND ST
SUITE 3600
MIAMI FL 33131

81 Name

Benjamin S. Schwartz

82 Street Address (P.O. Box Number is Not Acceptable)

2601 South Bayshore Drive

83

Suite 1600

84 City

Miami

85 FL

Zip Code

33133

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 Sections 607.0505, Florida Statutes.

SIGNATURE

Benjamin S. Schwartz
Benjamin S. Schwartz

2-7-95
DATE

(NOTE: Registered Agent signature required when reselecting)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PST
NAME	SCHWARTZ, BENJAMIN S.
STREET ADDRESS	100 SE 2ND ST. #3600
CITY- ST- ZIP	MIAMI FL
TITLE	D
NAME	SCHWARTZ, BENJAMIN S.
STREET ADDRESS	100 SE 2ND ST. #3600
CITY- ST- ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

1.1 TITLE	DPST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Schwartz, Benjamin S.	
1.3 STREET ADDRESS	2601 South Bayshore Drive #1600	
1.4 CITY- ST- ZIP	Miami, FL	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY- ST- ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY- ST- ZIP		

14. I do hereby certify that the information furnished with this form is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(9)(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; that the officer 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 does not function with an address.

SIGNATURE

Benjamin S. Schwartz
Benjamin S. Schwartz 2-7-95 (305) 460-7224