NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # N38208**

1. Corporation Name

C.B.J. OF NORTH MIAMI BEACH, INC.

Principal Place of Business	Mailing Address		
200 NE MIAMI GARDENS	1200 NE MIAMI GARDENS		
I MIAMI BEACH FL 33179	N MIAMI BEACH FL 33179		
IS	US		

FILED Mar 10, 1999 8:00 am § Secretary of State

03-10-1999 90250 008 ****61.25

Principal Place	e of Business	Mailing Address						
1200 NE MIAM	I GARDENS	1200 NE MIAMI GARDENS						
N MIAMI BEAC	H FL 33179	N MIAMI BEACH FL 33179						
US		US						
						,		
2. Principal Pl	ace of Business	2a. Mailing Address				3. Date Incorporated or Qualifed 05/18/1990		
21		26				4. FEI Number Applied For		
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.				59-2424775 Not Applicable		
City & State	9	City & State				\$8.75 Additional		
23		28				Certificate of Status Desired		
Zip	Country	Zip	Countr			6. Election Campaign Financing \$5.00 May Be		
24	25		30			Trust Fund Contribution Added to Fees		
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered Agent		
	Z, PHYLLIS			82	Street /	Address (P.O. Box Number is Not Acceptable)		
	Miami Gardens Dr. BCH FL 33179		F	83				
N WINAMI C	OCH FL 331/9		-	84	City	85 Zip Code		
			ĺ	1	•	FL		
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statute	s, the ab	ove	named	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered		
agent. I a	egistered agent, or both, in the State of medical from the state of the figure of the medical from the state of the state	ons of, Section 617.0503, Flor	ida Statu	tes.	oo.p.	States of States		
SIGNATURE			B /- 1 4	•		required when reinstating) DATE		
12.	Signature, typed or printed name of registered agent OFFICERS AND	and add it appropria	13.	Agen	т вядпация п	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP OI 1 IOERO 7 INC	DELETE	1.1 TIE	LE.		☐ Change ☐ Addition		
NAME	DANZIGER, MICHAEL		1.2 NA	ME				
STREET ADORESS	1200 NE MIAMI GARDENS DR.		1.3 STI	REET	ADDRESS			
CITY-ST-ZIP	N MIAMI BEACH FL		1.4 CIT	Y-ST	-ZIP			
TITLE	DV	Ø DELETE	2.1 TITLE			5 INGER, SOL Change Addition 1300 NE MIAMI GARDENS DRIVE		
NAME	WEBSTER, ALEXANDER		2.2 NAME					
STREET ADDRESS	1200 NE MIAMI GARDENS DR.		4		ADDRESS	N. MIAMI BEACH, PLA.		
CITY-ST-ZIP	N MIAMI BEACH FL	Decem	2. 4 CF	_	T-ZIP	Change Addition		
TITLE	DS DIVILIE	☐ DELETE	3.1 TITLE 3.2 NAME			, contained Tradition		
NAME	HOROWITZ, PHYLLIS		3.3 STREE		AUDDESS			
STREET ADDRESS	1200 MIAMI GARDENS DRIVE N MIAMI BEACH FL	_						
CITY-ST-ZIP	D D	DELETE		3.4. CITY-ST-ZIP 4.1 TITLE		GERKOW, SOL Change Addition		
NAME	SINGER, SOL		4. 2 NAME			1300 MIAMI GARDENS DRIVE		
STREET ADDRESS	ACCUSATION OF CONTAIN DOUBLE		4.3 STRE		ADDRESS	N. MIAMI BEACH, FLA		
CITY-ST-ZIP	NORTH MIAMI BEACH FL		4.4 CIT	Y-\$1	r-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition		
NAME			5.2 NA			1		
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		□ Set Exe	5.4 CIT 6.1 TIT		1-ZIP	☐ Change ☐ Addition		
TITLE		☐ DELETE	6.2 NA			Griange - Court		
NAME			ı		TADORESS	,		

6.4 CITY-ST-ZIP 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: