

FILE NOW: FILING FEE IS \$61.25.

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000005180 (3)

1. Corporation Name

MIAMI BEACH TRANSPORTATION MANAGEMENT ASSOCIATIO
N, INC.



Principal Place of Business

Mailing Address

300 41ST ST.
MIAMI FL 33140

300 41ST ST.
MIAMI FL 33140

3. Date Incorporated or Qualified
10/30/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21 301 41st Street

4. FEI Number

65-0628983

Applied For

☒ Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☒ XXX

\$8.75 Additional
Fee Required

City & State

City & State

28 Miami Beach, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

29 33140

30 US

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EVANS, JUDY
300 41ST ST.
MIAMI FL 33140

81 Name

~~XXXXXXXXXX~~

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

~~XXXXXXXXXXXXXXXXXX~~

83

84 City

~~XXXXXXXXXX~~

FL

85 Zip Code

~~33140~~

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

*SIGNATURE

Signature typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D^P LONDON, JUDY
STREET ADDRESS C/O STREAMLINE PROPERTIES, 1125 WASH. AVE.
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☐ DELETE
NAME D^V SCHWARTZ, GERALD K
STREET ADDRESS C/O 300 41ST ST.
CITY-ST-ZIP MIAMI FL 33140

TITLE ☐ DELETE
NAME D^T TISDALE, JAMES
STREET ADDRESS C/O 300 41ST ST.
CITY-ST-ZIP MIAMI FL 33140

TITLE ☒ DELETE
NAME D^S BRIGHAM, ERIKA
STREET ADDRESS C/O 300 41ST ST.
CITY-ST-ZIP MIAMI FL 33140

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Tisdale, Treasurer

Date:

Daytime Phone #

CR2E037 (12/95)