

05-16-2002 90047 028 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000001688

1. Entity Name
 SOUTH BEACH ESTATES, INC.

DO NOT WRITE IN THIS SPACE

90953

2. Principal Place of Business c/o L. Goldstein | **3. Mailing Address** c/o L. Goldstein
 200 S. Biscayne Blvd. | 200 S. Biscayne Blvd.

Suite Apt. # etc. Suite 2500		Suite Apt. # etc. Suite 2500	
City & State Miami, FL		City & State Miami, FL	
Zip 33131	Country US	Zip 33131	Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number
 65-1152995

Applied For	
Not Applicable	

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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7. Name and Address of Current Registered Agent

Name
CT Corporation System

Direct Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

City
Plantation

State
FL

Zip Code
33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida

SIGNATURE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when re-registering)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so! (See criteria on back)

January 1 - May 1: Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST Elias, David c/o L. Goldstein, 200 S. Biscayne Blvd., Ste. 2500 Miami, FL 33131	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP,AS Goldstein, Lester L. c/o L. Goldstein, 200 S. Biscayne Blvd., Ste. 2500 Miami, FL 33131	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Lester L. Goldstein, Vice President

4/30/02 305-374-7580

CR2E034B (12/01)

(10 ST)