

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90102 041 ***158.75

DOCUMENT # P02000125384

1. Entity Name
SWERDLOW NORTH MIAMI PARTNERS GP, INC.



Principal Place of Business
**18755 BISCAYNE BLVD.
MIAMI, FL 33180**

Mailing Address
**18755 BISCAYNE BLVD.
MIAMI, FL 33180**

44033510



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
321 East Hillsboro Blvd.
Suite, Apt. #, etc.
City & State
Deerfield Beach, Florida
Zip Country
33441 USA

03092004 Chg-P CR2E034 (10/03)

4. FEI Number
APPLIED FOR 41-2130657

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**STOTZER, THEODORE R
321 EAST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SWERDLOW, MICHAEL 18755 BISCAYNE BLVD. AVENTURA, FL 33180	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3390 Mary Street, Suite 200 Coconut Grove, Florida 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V Brett Dill 3390 Mary Street, Suite 200 Coconut Grove, Florida 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V Sidney Atzmon 18755 Biscayne Blvd. Aventura, Florida 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V Richard Swerdlow 3390 Mary Street, Suite 200 Coconut Grove, Florida 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VS Theodore R. Stotzer 321 East Hillsboro Blvd. Deerfield Beach, Florida 33441
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VT Jeff Scott 18755 Biscayne Blvd. Aventura, Florida 33180

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE By: Theodore R. Stotzer **April 15, 2004** **(954) 949-3480**
Theodore R. Stotzer, Executive Vice President