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

PROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT #
1. Corporation Name

SIGNATURE:

P93000001440 (5)

MIRAMAR BUILDING, INC.

Principal Plac	e of Business	Mailing Address		4 (BRANDE) DIE HALDE ANNO BRAND BRAND A	laska masan majar biddi midil alkal akat idal
1650 SE 17	th St.	1650 SE 17TH ST.			
310	DALE FL 33316	310 Ft. Laud Fl 33316			
US	DALE PL 33316	US US		3. Date Incorporated or Qualified 01/08/1993	3a. Date of Last Report 04/13/1995
2. Principal F	Page of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21		26		65-0383008	Not Applicable
Suite, Apt.	, #, @tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & Star 23	te	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ .	Country	Zip	Country	8. This corporation has liability for in	
24	25	29	30	Florida Statutes	_
_,	Name and Address of Cur	rrent Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
	REAL ESTATE, INC.		82 Street Addr	ess (P.O. Box Number is Not Acceptable	e)
	E 17TH ST, #310				······
SUITE			83		
FT. LAI	UD FL 33316		84 City		85 Zip Code
				ation submits this statement for the purp	FL []
or registe familier w SIGNATURE	vith, and accept the obligations of, S	Section 607.0505, Florida Statutes		rd of directors. I hereby accept the appo	·
12.	Signature, typied or printed make of registered a OFFICERS	AND DIRECTORS	TE: Fleg stered Agant signarure requires 13.	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
Tills	PD	DELETE	1 1 7/TLE	FOR TOTAL OF THE OFFICE AND ADDITIONS OF THE OFFICE AD	Change Addition
N4M-	DANE, JAN W.		1.2 NAME		
STREET ADDRESS	ACCO OF ATTU OT HOAD		1.3 STREET ADDRESS		
011Y S1-ZIP	FT LAUDERDALE FL		1.4 City - ST-ZIP		
MILE	VPS	☐ DELETE	2 1 TITLE		Change Addition
F7M:	BELT, A.J.III		2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
City St Zir	FT. LAUD FL	to the term of the	2 4 CITY - ST - ZIP		
TILLE		☐ DELETE	3 1 TITLE		Change Addition
NAM:			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIF. TITLE		DELETE	3 4 C(TY - ST - ZIP 4 1 T(TLE		Change Addition
NAME		Прин	4 2 NAME		C custille C votition
SIBELLADORESS			4.3 STREET ADORESS		
C1Y-S1-ZiP			4.4 City-St-Zip		
Teller		☐ DELETE	5 1 TITLE		Change Addition
NAM ₅		_	5.2 NAME		
STHEET ADDRESS			5.3 STREET ADDRESS		
0(h - \$1 - 2)P			5 4 CITY - ST - ZIP		
THEF		☐ DELE1E	6 1 TITLE		☐ Change ☐ Addition
NAM:			6.2 NAME		
STREET ADDRESSS			6 3 STREET ADDRESS		
CHY ST-ZIP			6 4 CITY - ST - ZIP		
certify the oath; tha	at the information indicated on this a	annual report or supplemental ann orperation or the receiver or truste	ual report is true and accura e empowered to execute thi	or the exemption stated in Section 119.0 ite and that my signature shall have the s s report as required by Chapter 607, Flo	ame legal effect as if made under

AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/1/96 (924) 523-2070.