Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000018843

1. Corporation Name

City & State

23

24

Zip

PELICAN ON OCEAN, INC.				
Principal Place of Business	Mailing Address			
826 OCEAN DR MIAMI BEACH FL 33139	826 OCEAN DR MIAMI BEACH FL 33139			
2. Principal Place of Business	2a. Malling Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			

City & State

28

Zip

25 29

Country

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90077 045 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

Personal Property Tax.

03/12/1993 4. FEI Number

65-0466132

	9. Name and Address of Current Registered Agent		TO: INDITIE BITE ALGEBRA OF THEM TROUBS				
201 1600	PORATION COMPANY OF MIAMI S BISCAYNE BLVD MIAMI CENTER MI FL 33131	81 Name 82 Street 83 84 City	Michele Meel Address (P.O. Box Number is Not Acpeptable) & 2 6 Ocean Dri LiAmi Beach	0 √S Zip C FL 85 Zip C 33	ode 134		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or physical							
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12		
TITLE	VPS DELETE	1.1 TITLE		☐ Change	☐ Addition		
NAME	ROSSO, RENZO	1.2 NAME					
STREET ADDRESS	826 OCEAN DR	1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI BEACH FL 33139	14 CITY-ST-ZIP					
TITLE	P DELETE	2.1 TITLE		Change	☐ Addition		
NAME	MERLO, MICHELE	2.2 NAME		• ,			
STREET ADDRESS	826 OCEAN DR	2 3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI BEACH FL 33139	2. 4 CITY-ST-ZIP					
TITLE	DELETE	3.1 TITLE		☐ Change	☐ Addition		
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS			1		
CITY-ST-ZIP		3.4. CITY-\$T-ZIP		· ·			
TITLE	DELETE	4.1 TITLE		Change	☐ Addition		
NAME		4.2 NAME			1		
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE	DELETE	5.1 TITLE	· .	☐ Change	☐ Addition		
NAME		5.2 NAME	,	•	ļ		
STREET ADDRESS		53 STREET ADDRESS)		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		·			
TITLE	☐ DELETE	6.1 TITLE	,	Change	☐ Addition		
NAME		6.2 NAME		•			
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		6.4 CITY-ST-ZIP					
44	which the sale information according with this filing door not qualify for the	a augustian atatac	Lie Coation 110 07/3\/i\ Elocido Statutos I fueth	are costificated that in	formation		

Country

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indicated on this annual report or 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an example with an address, with all other like empowered.