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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

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DOCU				7	-	#

P93000025380 (5)

BUENA VISTA COURT CORPORATION

Principal Place of Business Mailing Address						- I TOOTION TIN MINDE APAIN COURT COURT FINDS CORRES AND AND SAME COURT FOR A				
35 NE 40 S MIAMI FL 3		35 NE 40 STREET MIAMI FL 33137								
						3. Date Incorporated or Qualified 04/06/1993	3a. Date of Last 02/21/1			
E. T. Hayler I Blood on the Control of the Control		2a, Mailing Address				4. FEI Number 65-0408459		Applied For Not Applicat		
t Suite Apt 	. 4, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required		
L _ City & Sta _	tle	City & State				Election Campaign Financing Trust Fund Contribution	1 1 7 -	00 May Be led to Fees		
.L	Country	Zιρ		Country		8. This corporation has liability for	intangible tax under	s 199.032,		
,	25	29	30				s 🗌 No			
	Name and Address of C	Current Registered Agent				10. Name and Address of New	Name and Address of New Registered Agent			
				B1	Name					
KLEIN,	, MAC			82	Street A	iress (P.O. Box Number is Not Acceptable)				
35 NE 40 STREET										
MIAMI	FL 33137			83						
				84	City		— , 85	Zip Code		
							FL "			
1. Pursuan	it to the provisions of Sections 60	17,0502 and 607,1508, Florida Statu	ites, the	above-	named cor	poration submits this statement for the popard of directors. I hereby accept the ap	urpose of changing it pointment as register	s registereo e ed agent. I a		
or regist familiar v	tered agent, or both, in the State t with, and accept the obligations o	of Soction 607.0505, Florida Statute	es es	ine corp	oranon o i	350.00.00.00.00.00.00.00.00.00.00.00.00.0				
SIGNATURE							DATE			
	Superfuse. Specifier printed removal register				nt signature re	quired when reinstating) ADDITIONS/CHANGES TO OF		TORS IN 12		
2		RS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	Chang			
:: LE	D	L) petrie		1 1 THUE						
AMi	KLEIN, MAC			1.2 NAME						
THEFT ADDRESS	35 40TH ST				I ADORESS					
HY SI ZIF	MIAMI FL 33137	DELETE		1 4 CHY -: 2 1 THLE	51-ZIP		Chang	e		
HL:	D D		ı		ĺ			· Lord		
28ME	KLEIN, MARY			22 NAME						
GREEF ADDRES					T ADDRESS					
JH Y + S1 + ZW	MIAMI FL 33137	☐ DELETE		2 4 CITY -	S1-ZIP		☐ Chang	e		
MI: F				3 1 THILE						
NAME:				3 2 NAME						
STREET ADDRES	8		- 1	33 STHEE	1 ADDRESS					
$C(f,r+S) + 7(\delta)$		☐ DELÉTE		3.4 CITY -		,	Chan	ge 🔲 Addi		

64 CHY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is vokintarily 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 certify 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 attachment with an address.

4.2 NAME

5 1 TITLE

5.2 NAME 5 3 STREET ADDRESS

6 1 111LE

62 NAME

4.3 STREET ADDRESS

44 City - ST- ZIP

5 4 CiTY - ST - 71P

6 3 STHEE1 ADDRESS

NaMi

TillE

TIEF

H-Mr

STREET ADDRESS

SUBSEL AFCRESS

STELL ADDRESS

OHY \$1-20P

THY SLIP

DELETE

[]] DELETE

305 516-8189 Daylaris Priore #

☐ Change

Change

Addition

☐ Addition