

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000042105 (5)

1. Corporation Name

THE GATE, SOUTH BEACH, INC.



Principal Place of Business

1399 S.W. FIRST AVE.
2 S. BISCAYNE BLVD., SUITE 3400
MIAMI FL 33130
US

Mailing Address

15760 VENTURA BLVD
828
ENCINO CA 91436
US

2. Principal Place of Business

2a. Mailing Address

21 Subst. Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

COBB, THOMAS C ESQ.
1399 S.W. FIRST AVE.
1 BISCAYNE TOWER, SUITE 3400
MIAMI FL 33130

3. Date Incorporated or Qualified
06/15/1993

3a. Date of Last Report
04/28/1995

4. FEI Number
65-0429963

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1502, 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 607.0902, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME PD
GERSTEN, ALBERT H JR.
15760 VENTURA BLVD, SUITE 828
ENCINO CA
TITLE VSD
NAME COLLIER, MARTIN
15760 VENTURA BLVD.
ENCINO CA
TITLE VD
NAME GEIGER, STEPHEN J.
15760 VENTURA BLVD.
ENCINO CA
TITLE

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[] DELETE

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. NAME

22. STREET ADDRESS

23. CITY, ST, ZIP

[] Change [] Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily 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 oath. That I am an officer or director of this corporation or a shareholder 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 both, attached with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/96

818-981-2700

CR2E034 (12/95)