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PROFIT CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000053712 (4)

OCEAN CAY DEVELOPMENT CORP.

FILED May 15 1998 8:00am Secretary of State



| Principal Place | e of Business | Mailing Address | | | | (18946991 110 19199 1141) 98416 88114 8841 8849 | * 21125 11111 | 10001 | BIA AIRI INDI | |
|--------------------------------|--|---|--------------------|---|------------------|--|---------------|---------------|----------------|--|
| C/O KB HOLI Dania FL 330 | DINGS / 647 E. DANIA BCH BLVD 104 | C/O KB HOLDINGS / 647 E. DANIA BCH BLVD DANIA FL 33004 | | | SCH BLVD | | | | | |
| 1 | | | | | | DO NOT WRITE IN TI | HIS SPAC | £ | | |
| | | | | | | Date Incorporated or Qualified 08/01/1993 | | | | |
| 2. Principal P | lace of Business | 2a. Mailing Addr | ess | | | 4, FEt Number | | Α | pplied For | |
| 21 | | 26 | | | | AP 04070FF | | | ot Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | SR 75 Additional | | | | |
| 22 | | 27 | | | | 5. Certificate of Status Desired | | | equired | |
| City & State | | City & State | | | | 6. Election Campaign Financing | \$ | 5.00 | May Be | |
| 23 | | 28 | 28 | | | Trust Fund Contribution | | Added to Fees | | |
| Zip | Country | Zφ | Co | untry | / | 8. This corporation owes or has paid the | current v | ear In | tangible | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due June 30. | Yes | s 🕽 | X (No] | |
| | 9. Name and Address of Curren | l Registered Agent | | I | | 10. Name and Address of New Register | ea Agen | 1 | | |
| | GNER, J | | | 81 | Name | | | | | |
| C/O KB HOLDINGS | | | | | Street Ad | Idress (P.O. Box Number is Not Acceptable) | | | | |
| 647 EAST DANIA BEACH BOULEVARD | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| DAI | NIA FL 33004 | | | 83 | | | | | | |
| | | | | 84 | 0.5 | | | | | |
| | | | | 04 | City | F | -L 85 | Zip | Code | |
| 11. Pursuant t | to the provisions of Sections 607.0502 | 2 and 607.1508, Floric | la Statules, the a | above | e-named co | reaction submits this statement for the number | | ıging i | ts registered | |
| l Onice or it | egi ste red agent, or both, in the State m fam iliar with, and accept the obliga | or Florida, Such chan | de was authorize | ea by | / the coroor | ration's board of directors. I hereby accept the | appointm | ent as | registered | |
| SIGNATURE | , | | | -10101 | ·· | | | | | |
| | Signature, typed or profed name of registered age | Land ble d'applicable | (NOTE Register | ed Age | nt signature req | quired whon reinstating) DAT | É | | | |
| 12. | OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OFFICERS | AND DIRE | CTOF | 1S IN 12 | |
| TITLE | OP . | ☐ DE | LETE 1.11 | ITLE | | | □c | hange | Addition | |
| NAME | B OULIS, GUS | | 1.21 | IAME | | | | | | |
| STREET ADDRESS | C/O KB HOLDINGS / 647 E. D | ANIA BCH BLVD 1.3 S | | STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | DANIA FL 33004 | | 1.4 (| HTY-S | T-ZIP | | | | | |
| TITLE | VST | DE | LETE 2.11 | TILE | | | C | hange | Addition | |
| NAME | WAGNER, J | | 2.21 | IAME | | | | | | |
| STREET ADDRESS | C/O KB HOLDINGS / 647 E. D | ANIA BCH BLVD | 235 | 2.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | Dania Fl | | 2.4 | CITY - S | ST - ZIP | | | | | |
| TITLE | | ☐ DE | | | | , , , , , , , , , , , , , , , , , , , | C | hange | Addition | |
| NAME | | | 3.2 M | IAME | | | | - | _ | |
| STREET ADDRESS | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | OITY-S | | | | | | |
| TITLE | | ☐ DE | | | | | c | hange | Addition | |
| NAME | | | 4.24 | NAME | | | | - | _ | |
| STREET ADDRESS | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | ITY-S | | | | | | |
| TITLE | | DEI | | | | | CI | hange | Addition | |
| NAME | | _ | 5.2 N | | | | | | | |
| STREET ADDRESS | | | | | AUDRESS | | | | | |
| CITY-ST-ZIP | | | | :πτγ-S1 | | | | | | |
| TITLE | | DEE | | | 1-746 | | ☐ CI | nanne | Addition | |
| NAME | | _ 56. | 6.2 N | | | | יי פי | milite | AUGILION | |
| STREET ADDRESS | | | | | ADDDECC | | | | | |
| | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | And the state of t | | 6.4 C | ITY-SI | - ZIP | | | | | |

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 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 artistinent with an address.