FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED
95 MAY -1 AM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000074660 (0)

1. Corporation Name

LANDMARK INVESTMENTS OF MIAMI, INC.

Principal Place of Business	Mailing Address
1000 PONCE DE LEON BLVD SUITE 204 CORAL GABLES FL 33134	1000 PONCE DE LEON BLVD SUITE 204 CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/22/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0449597 ☐ 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

2. Principal Place of Business 21 ___ 2a. Mailing Address 26 ___
Suite, Apt. #, etc. 22 ___ Suite, Apt. #, etc. 27 ___
City & State 23 ___ City & State 28 ___
Zip 24 ___ Country 25 ___ Zip 29 ___ Country 30 ___

9. Name and Address of Current Registered Agent

LUPINO, JAMES S
5975 SUNSET DR
SUITE 801
MIAMI FL 33143

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 607.0502 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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1 TITLE	☐ Change ☐ Addition
NAME	STEWART, JAMES E	1 NAME	
STREET ADDRESS	8410 NW 53RD TER SUITE 127	1 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	1 CITY-ST-ZIP	
TITLE	SD	21 TITLE	☐ Change ☐ Addition
NAME	MARTINEZ, EDITH	22 NAME	
STREET ADDRESS	8410 NW 53RD TER SUITE 127	23 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	24 CITY-ST-ZIP	
TITLE	PD	31 TITLE	☐ Change ☐ Addition
NAME	NAVARRO, RAYMOND	32 NAME	
STREET ADDRESS	1000 PONCE DE LEON BLVD SUITE 112	33 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 33134	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption status 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 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.

SIGNATURE: [signature] 5-01-95 (305) 445-1145

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Raymond Navarro, President
Date — Daytime Phone

0137633 CP

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CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

[illegible] PM 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000076122 (9)**

1. Corporate Name

BLAIRSTONE BUILDING, INC.

Principal Place of Business	Mailing Address
760 BROADWAY LONGBOAT KEY FL 34228	760 BROADWAY LONGBOAT KEY FL 34228

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/03/1993**

3a. Date of Last Report: **06/06/1994**

2. Principal Place of Business — 21:

2a. Mailing Address — 26:

Suite, Apt. #, etc. — 22:

Suite, Apt. #, etc. — 27:

City & State — 23:

City & State — 28:

ZIP — 24:

County — 25:

ZIP — 29:

County — 30:

4. FEI Number: **65-0452493** ☐ 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

9. Name and Address of Current Registered Agent

GREENE, ROBERT F
1301 SIXTH AVE. WEST
SUITE 505
BRADENTON FL 34205

10. Name and Address of New Registered Agent

91 Name

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

93

94 City **FL** 95 Zip Code

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 [illegible] DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
01 TITLE	PD	11 TITLE	☐ Change ☐ Addition
02 NAME	ROGERS, ALFRED T	12 NAME	
03 STREET ADDRESS	2924 W. TAMBAY AVE.	13 STREET ADDRESS	
04 CITY ST ZIP	TAMPA FL	14 CITY ST ZIP	
05 TITLE	VPD	21 TITLE	☐ Change ☐ Addition
06 NAME	LINDER, OSCAR R	22 NAME	
07 STREET ADDRESS	401 GULF BLVD.	23 STREET ADDRESS	
08 CITY ST ZIP	BOCA GRANDE FL	24 CITY ST ZIP	
09 TITLE	VPD	31 TITLE	☐ Change ☐ Addition
10 NAME	LINDER, P. S JR.	32 NAME	
11 STREET ADDRESS	2919 ELIZABETH PLACE	33 STREET ADDRESS	
12 CITY ST ZIP	LAKELAND FL	34 CITY ST ZIP	
13 TITLE	SD	41 TITLE	☐ Change ☐ Addition
14 NAME	PHILLIPS, RAYMOND B	42 NAME	
15 STREET ADDRESS	1235 JEFFERSON DR.	43 STREET ADDRESS	
16 CITY ST ZIP	LAKELAND FL	44 CITY ST ZIP	
17 TITLE		51 TITLE	☐ Change ☐ Addition
18 NAME		52 NAME	
19 STREET ADDRESS		53 STREET ADDRESS	
20 CITY ST ZIP		54 CITY ST ZIP	
61 TITLE		61 TITLE	☐ Change ☐ Addition
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY ST ZIP		64 CITY ST ZIP	

14. I like 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)(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 above, if changed, or on an attachment with an address.

SIGNATURE: [signature] Alfred T. Rogers 4/25/95 (813)276-6419

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0348836 CP