FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000079755 (3)

1. Corporate Name

PARK PLACE BUILDING, INC.

Principal Address

2121 PONCE DE LEON BLVD.
PENTHOUSE II
CORAL GABLES FL 33134
US

Mailing Address

2121 PONCE DE LEON BLVD.
PENTHOUSE II
CORAL GABLES FL 33134
US

FOR OFFICE USE ONLY

3. Date Incorporated or Qualified: 11/18/1993

3a. Date of Last Report: 04/29/1994

2. Principal Office Address

21

Suite, Apt. or Bldg.

22

City, State, Zip

23

24 Zip | 25 Country

2a. Mailing Address

26

Suite, Apt. or Bldg.

27

City & State

28

29 Zip | 30 Country

4. FEI Number: 65-0449725

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

7. This corporation is subject to chapter 607 of the Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BOGGIO, LLOYD J
2121 PONCE DE LEON BLVD.
PENTHOUSE SUITE
CORAL GABLES FL 33134

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 Section 607.0505, 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

12. OFFICERS AND DIRECTORS

Title: D
Name: MARCUS, STEWART
Address: 2121 PONCE DE LEON BLVD., PENTHOUSE SUITE
City-St-Zip: CORAL GABLES FL 33134

Title: D
Name: BOGGIO, LLOYD J
Address: 2121 PONCE DE LEON BLVD., PENTHOUSE SUITE
City-St-Zip: CORAL GABLES FL 33134

Title:
Name:
Address:
City-St-Zip:

Title:
Name:
Address:
City-St-Zip:

Title:
Name:
Address:
City-St-Zip:

Title:
Name:
Address:
City-St-Zip:

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

Title:
Name:
Address:
City-St-Zip:

☐ Change ☐ Addition

Title:
Name:
Address:
City-St-Zip:

☐ Change ☐ Addition

Title:
Name:
Address:
City-St-Zip:

☐ Change ☐ Addition

Title:
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City-St-Zip:

☐ Change ☐ Addition

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Name:
Address:
City-St-Zip:

☐ Change ☐ Addition

Title:
Name:
Address:
City-St-Zip:

14. I hereby certify that the information indicated on this report or supplemental 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 this report is filed within the time period provided by section 607.0505, Florida Statutes.

SIGNATURE: Lloyd J. Boggio 4/20/95 (305)441-8188

SIGNATURE OF TYPE OR PRINT NAME OF SIGNING OFFICER OR DIRECTOR

0136089 CP