DOCUMENT # P94000014769           1. Corporation Name           EAST ATLANTIC PROPERTY GROUP, INC.           Principal Place of Business           Mailing Address           Solid A W, 77 ALE, MAN F, 3066           MAN F, 3066           Solid A, W, 77 ALE, MAN F, 3066           Solid A, W, 77 ALE, MAN F, 3066           Copy A States           2.           Do NOT WATE IN THIS SPACE           2.           DENDERAL REL R.           2.           DENDERAL REL REL REL REL REL REL REL REL REL RE		PROFIT RPORATION UAL REPORT <b>1999</b>		Katheri Secretar	RTMENT OF STATE ne Harris y of State CORPORATIONS	Jan 29, 19 Secretar	999 8:00a y of State	
Principal Place of Business Spite N W. 77 APE Spite NW. 7	1. Corporation			769		01-29-1999 90069	9 034 ***150.00	
Principal Place of Business     Mailing Address       300-64 NV, 77 AVE     300-64 NV, 77 AVE       MAMI FL 33166     301-64 NV, 77 AVE       MAMI FL 33166     302-33/1994       2. Principal Place of Business     2s. Mailing Address       4. FEI Number     Applied FC       5. Out intercent of Business     2s. Mailing Address       4. FEI Number     Applied FC       5. Out intercent of Business     2s. Mailing Address       2. Principal Place of Business     2s. Mailing Address       4. FEI Number     Applied FC       Suite, Apt. R. etc.     5. Controate of Status Desined       2. Principal Place of Business     2s. Control       2. Principal Place of Clusters     55.00 May be       2. Principal Place of Address of Control     7co       2. Principal Place of Address of New Registered Agent     10. Name and Address of New Registered Agent       2. Name and Address of Control     55.00 May be       9. Name and Address of Status Control Registered Agent     10. Name and Address of New Registered Agent       11. Protectam to the provisions of Sections 607 0502 and 607 1505. Fordia Statutes, the above named cooponalion submits this statement for the propose of chunging its registered agent       12. Protectam to the provisions of Sections 607 0502 and 607 1505. Fordia Statutes, the above named cooponalion submits this statement for the propose of chunging its registered acabove named cooponalion submits this statement for the propo								
MAM FL 33166     DAM FL 33166       2. Principal Piace of Business     2a. Mailing Address       2. Principal Piace of Business     2a. Mailing Address       3. Date Incorporated or Gusined     2a. Mailing Address       2. Principal Piace of Business     2a. Mailing Address       3. Date Incorporated or Gusined     2a. Mailing Address       2. Principal Piace of Business     2b. P. A. Rec.       2. Principal Piace of Business     2b. P. A. Rec.       2. Principal Piace of Business     2b. Country       2. Barret Address of New Registered Agent     10. Name and Address of New Registered Agent       9. Sole of Business of Sections 807.0502 and 607.0505. Portical Statutes, the above named corporation submits this statuset to the approximate it as fragistered Agent       11. Paramet to the provisions of Sections 807.0502 and 607.0505. Portical Statuses of New Registered Agent       12.	Principal Plac	ce of Business	Maili	ng Address		I TOMISOULISU SUSI UCUSE UNITE UL		<b>DIALD IDIA (BDA</b>
2. Principal Place of Business     2. Mailing Address     4. FEI Number     65-0402541     1							TE IN THIS SPACE	
R1     28     65:0402541     Not Applicable       Sulle, Apt. #, etc.     27     5. Certification of Status Desired     \$8.75 Additional       CDr & State     27     City & State     5. Certification of Status Desired     \$8.75 Additional       ZDP     Country     ZDP     Country     ZDP     Country     Added to Face       ZDP     Country     ZDP     Country     ZDP     Country     State       ZDP     Country     ZDP     Country     State     State     State       ZDP     Country     ZDP     Country     State     State     State       ZDP     Country     ZDP     Country     State     State     Name       State     28     The coondition wess the current year financing     Maded to Face     Name       State     28     The coondition wess the current year financing     Name       State     28     The coondition wess the current year financing     Name       State     28     The coondition wess the current year financing     Name       State     28     The coondition wess the current year financing     Name       State     28     Street Address (P.O. Box Number is Not Acceptable)     Name       State     28     Street Address (P.O. Box Number is Not Acceptab						· · ·	• •	
Suite, Apt. #, etc.	_ ·	Place of Business		lailing Address				•
27       City & State       City & State       City & State       Election Campaign Financing       Finance Required         20       City & State       8. Election Campaign Financing       Addet to Fee Required         20       Country       28       Country       8. This connotino owes the current year intranspite         21       23       29       30       Personal Property Tax.       Live & No         30       9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       11         20301-81 N.W. 77 AVENUE       81       Street Address (P.O. Box Number is Not Acceptable)       83         3031-81 N.W. 77 AVENUE       81       Street Address (P.O. Box Number is Not Acceptable)       84       City & FL       8       20 Coddress         3031-81 N.W. 77 AVENUE       81       Street Address (P.O. Box Number is Not Acceptable)       83       11       Provisions of Sections 607 Abs02 and 607 1505. Florids Statules, the above-mamed corporation source of directors. I horeby accept the appointment as regulatered agent. I amfained the obligators of Section 607 Abs05. Florids Statules.       11 <t< td=""><td></td><td>. #, etc.</td><td></td><td>uite, Apt. #, etc.</td><td></td><td></td><td>\$8.75 /</td><td></td></t<>		. #, etc.		uite, Apt. #, etc.			\$8.75 /	
Bit     Test Fund Contribution     Added to Fees       Zip     Country     Zip     Country     Its Fund Contribution     Added to Fees       Xip     Call     Zip     Country     Its Fund Contribution     Added to Fees       S. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     Its Fund Contribution     Its Fund Contribution       BEROSA, ANTHONY T     Signification Soft Sections 607 0552 and 607 1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or the purpose of the obligations of Section 607 0505. Florids Statutes, the above named corporation's board of directors. I hereby accept the appointment is registered agent, or the purpose of changing its registered agent, or there agent, or the purpose of changing its registered agent, or th	2		. 27	-		5. Certifcate of Status Desired	Fee Re	quired
Zip         Country         2/p         Country         Is is accountion over the our intengible Personal Property Tax.         Image Intensity Personal Propertintensity Personal Property Tax.         Image Intensity	City & Sta	te		tity & State		1		•
		Count		ip	Country			01003
DEROSA, ANTHONY T 3301-B N.W. 77 AVENUE MAMI FL 33166     81     Name       11. Presumm to the provisions of Sections 607.0502 and 607 1508. Florida Statutes.     84     City     FL     05     Zip Code       11. Presumm to the provisions of Sections 607.0502 and 607 1508. Florida Statutes.     84     City     FL     05     Zip Code       12. Presumm to the provisions of Sections 607.0502 and 607 0505. Florida Statutes.     164     City     FL     05     Zip Code       13. Optimized agent, or both, in the State of Florida. Statutes.     (NOTE Register Agents)     Date     Date       21. Presumm to the provisions of Sections 607.0505. Florida Statutes.     00TE Register Agents)     Date     Date       21. Presumm to the provision area or instance agents and a code the diagrating at the registered of directors. I hereby accept the appointments are registered     Date       21. OPFICERS AND DIRECTORS     13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     Date       22. OPFICERS AND DIRECTORS     13. ADDITIONS/CHANGES TO OFFICER AND DIRECTORS IN 12       33. STREET ADDRESS     001-1111111     01-11111       33. STREET ADDRESS     021-1111111     01-111111       33. STREET ADDRESS     021-111111     01-111111       33. STREET ADDRESS     03. STREET ADDRESS     021-1111111       33. STREET ADDRESS     021-111111     01-11111111       33. STREET ADDRESS	4				30			□ No
3901-B NW: 77 AVENUE       32         MAMI FL 33166       33         44       City         45       City         46       City         47       City         48       City         44       City         44       City         44       City         44       City         44       City         44       City         45       City         46       City         46       City         47       City         48       City         48       City         48       City         49       City         49       City         40       City				red Agent	81 Name	10, Name and Address of New H	tegistered Agent	· · ·
SUI-15 N.W. 7/1 AVENUE       Bit       226 Code         MIANI FL 33166       Bit       City       FL       85       226 Code         11: 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, and registered agent agent, and registered agent agent, and registered agent agent, and registered agent agent and registered agent agent and registered agent age			21、1、11、11、11、11、11、11、11、11、11、11、11、11		82 Street Add	iress (P.O. Box Number is Not Accenta	ble)	
It Presum 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 agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of Section 607.0505. Florida Statutes.         SIGNATURE       Signature, type or primed runne of registered agent agents or display of the obligations of Section 607.0505. Florida Statutes.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         DEROSA, ANTHONY T       DELETE       1.1 mLE       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         ITTLE       P       DELETE       1.2 multic transfer Appression       Change       Addition         State range       DIRECTORS       1.3       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       Change       Addition         TITLE       P       DEROSA, ANTHONY T       33 STREET ADDRESS       Change       Addition         Street ADDRESS       209 N.W. 191 ST., SUITE 902       2.3 STREET ADDRESS       3.3 STREET ADDRESS       3.3 STREET ADDRESS         Grows First Part       DELETE       1.1 THE       Change       Addition         STREET ADDRESS       3.3 STREET ADDRESS       3.3 STREET ADDRESS       3.3 STREET ADDRESS       3.3 STREET ADDRESS         Grows First Part       DELETE       3.1 THE       3.2 NAME <th< td=""><td></td><td></td><td>· · · · · · · · · · · · · · · · · · ·</td><td></td><td></td><td></td><td>en ne en e</td><td>11-12-1-1-1-245 571-2-40-5-1-25</td></th<>			· · · · · · · · · · · · · · · · · · ·				en ne en e	11-12-1-1-1-245 571-2-40-5-1-25
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agent 1 am amiliar with a data of the balance of balance was adultated by the constraints and a data of the state of the period was adultated.       Change       DATE         SIGNATURE       Signature, typed or printed name of registered agent and time if applicable.       (NOTE: Registered Agent agenature registed was resultated).       DATE         12.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         TITLE       P       Change       Additio         street Address       3901-B N.W. 77 AVENUE       13 STREET ADDRESS         Grav.str.2P       MIAMI FL 33166       14 CITY-ST-2P         TITLE       VP       DELETE       21 STREET ADDRESS         STREET ADDRESS       24 CITY-ST-2P       Change       Additio         STREET ADDRESS       32 STREET ADDRESS       24 CITY-ST-2P       Change       Additio         STREET ADDRESS       33 STREET ADDRESS       33 STREET ADDRESS       33 STREET ADDRESS       Change       Additio         STREET ADDRESS       34 CITY-ST-2P       Change       Additio       33 STREET ADDRESS       Change       Additio         STREET ADDRESS       33 STREET ADDRESS       33 STREET ADDRESS       Change       Additio         STREET ADDRESS       33 STREET ADDRESS       33 STREET ADDRESS       Change       Additio		•						<u>组织的</u> 有效。
NAME DEROSA, ANTHONY T 12 NAME 12 NAME 3901-B N.W. 77 AVENUE 13 STREET ADDRESS 3901-B N.W. 77 AVENUE 13 STREET ADDRESS 3901-B N.W. 77 AVENUE 14 CITV-ST-ZIP Change Addition Ad					84 City es, the above-named cor	poration submits this statement for the	FL   purpose of changing its	registered
STREET ADDRESS       3901-B N.W. 77 AVENUE       1.3 STREET ADDRESS         CITY-ST-ZIP       MIAMI FL 33166       1/4 CITY-ST-ZIP         TITLE       VP       DELETE       2.1 TITLE         NAME       HANDLEY, ANTHONY       22 STREET ADDRESS         CITY-ST-ZIP       Z3 STREET ADDRESS       2299 N.W. 191 ST., SUITE 902         CITY-ST-ZIP       Z4 CITY-ST-ZIP       Change       Addition         TITLE       Z4 CITY-ST-ZIP       Change       Addition         STREET ADDRESS       33 STREET ADDRESS       CITY-ST-ZIP       Change       Addition         STREET ADDRESS       33 STREET ADDRESS       CITY-ST-ZIP       Change       Addition         STREET ADDRESS       33 STREET ADDRESS       CITY-ST-ZIP       Change       Addition         STREET ADDRESS       CITY-ST-ZIP       Change       Addition       Change       Addition         STREET ADDRESS       CITY-ST-ZIP       Change       Addition       Change       Addition         NAME       CITY-ST-ZIP       Change       Change       Addition         STREET ADDRESS       CITY-ST-ZIP       Change       Change       Addition         NAME       STREET ADDRESS       CITY-ST-ZIP       Change       Addition         <	agent. I a	Signature, typed or printed name	e of registered agent and title if ap	plicable. (NOTE:	84 City es, the above-named cor thorized by the corporat ida Statutes.	ed when reinstating), ( ),( ),(	PL purpose of changing its the appointment as repointment as repoi	registered gistered
GTTY-ST-ZIP       MIAMI FL 33166       14 CTTY-ST-ZIP         TTLE       VP       DELETE       2,1 TTLE         NAME       HANDLEY, ANTHONY       22 NAME         STREET ADDRESS       299 N.W. 191 ST., SUITE 902       23 STREET ADDRESS         CTTY-ST-ZP       AVENTURA FL 33180       24 CTTY-ST-ZIP         TTLE       DELETE       31 TTLE         NAME       32 NAME       33 STREET ADDRESS         STREET ADDRESS       33 STREET ADDRESS         CTTY-ST-ZP       34 CTTY-ST-ZIP         TTLE       DELETE       31 TTLE         NAME       32 NAME         STREET ADDRESS       34 CTTY-ST-ZIP         TTLE       DELETE       41 TTLE         NAME       32 NAME         STREET ADDRESS       34 CTTY-ST-ZIP         TTLE       DELETE       41 TTLE         NAME       42 NAME         STREET ADDRESS       43 STREET ADDRESS         CITY-ST-ZIP       44 CTTY-ST-ZIP         TTLE       DELETE       51 TTLE         NAME       52 NAME       53 STREET ADDRESS         CITY-ST-ZIP       S1 TTLE       Change         NAME       53 STREET ADDRESS       53 STREET ADDRESS         CITY-ST-ZIP <td>SIGNATURE</td> <td>Signature, typed or printed nam</td> <td>e of registered agent and title if an DFFICERS AND DIRECT</td> <td>plicable. (NOTE:</td> <td>84         City           ess, the above-named cor         thorized by the corporat           ida Statutes.         astatutes.           Registered Agent signature require         13.           1.1 TITLE         1.1 TITLE</td> <td>ed when reinstating), () () () () () () () () () () () () ()</td> <td>FL purpose of changing its to the appointment as re- DATE FICERS AND DIRECTO</td> <td>registered gistered</td>	SIGNATURE	Signature, typed or printed nam	e of registered agent and title if an DFFICERS AND DIRECT	plicable. (NOTE:	84         City           ess, the above-named cor         thorized by the corporat           ida Statutes.         astatutes.           Registered Agent signature require         13.           1.1 TITLE         1.1 TITLE	ed when reinstating), () () () () () () () () () () () () ()	FL purpose of changing its to the appointment as re- DATE FICERS AND DIRECTO	registered gistered
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14. 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 of the eceiver 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, with all other like empowered.	SIGNATURE agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Bigneture, typed or printed nam C DEROSA, ANTHON 3901-B N.W. 77 AV MIAMI FL 33166 VP HANDLEY, ANTHO 2999 N.W. 191 ST. AVENTURA FL 331	r, in the State of Portda. sept the obligations of, Si e of registered agent and title if ag DFFICERS AND DIRECT IV T /ENUE NY , SUITE 902 80		B4       City         B3       City         B4       City         B5       thorized by the corporation of the corpo	ed when reinstating)	FL         purpose of changing its         purpose of changing its         DATE         FICERS AND DIRECTO         Change	RS IN 12 Addition

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