

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 12, 1999 8:00 am
Secretary of State

07-12-1999 90009 038 ***550.00

DOCUMENT # **P94000016956**

BAY TERRACE CLUB, INC.

Principal Place of Business

Mailing Address

1401 N.E. 16TH AVENUE
NORTH MIAMI FL 33161

12401 N.E. 16TH AVENUE
NORTH MIAMI FL 33161

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/03/1994

4. FEI Number

65-0476071

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 owes the current year
Intangible Personal Property. ☐ Yes ☐ No

Principal Place of Business

1401 COLLINS AVE

Suite, Apt. #, etc.

2a. Mailing Address

26 1401 COLLINS AVE

Suite, Apt. #, etc.

City & State

Miami Beach Florida

28. City & State

28 Miami Beach Florida

Zip

33139

Country

25 USA

29. Zip

33139

Country

30 USA

9. Name and Address of Current Registered Agent

KASDIN, NEISEN O
1110 BRICKELL AVENUE
7TH FLOOR
MIAMI FL 33131

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

I, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

1. LE ☐ DELETE

ME P
GLAZER, RON
12401 N.E. 16TH AVENUE
NORTH MIAMI FL

2. LE ☐ DELETE

ME

3. LE ☐ DELETE

ME

4. LE ☐ DELETE

ME

5. LE ☐ DELETE

ME

6. LE ☐ DELETE

ME

7. LE ☐ DELETE

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8. LE ☐ DELETE

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9. LE ☐ DELETE

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10. LE ☐ DELETE

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11. LE ☐ DELETE

ME

12. LE ☐ DELETE

ME

13. LE ☐ DELETE

ME

14. LE ☐ DELETE

ME

15. LE ☐ DELETE

ME

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 attachment with an address.

SIGNATURE:

RON GLAZER Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/99

305-531-0121

CR2E034 (5/99)