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

CORPORATION	
ANNUAL	REPOR

1996

P94000027188 (9) DOCUMENT # SOUTHERN BAY MANAGEMENT, INC. Principal Place of Business Mailing Address 1649 S. E. 13TH STREET 1649 S. E. 13TH STREET FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316 3. Date Incorporated or Qualified 3a. Date of Last Report 04/05/1994 03/07/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0483852 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032. 24 29 💢 Yes 🔲 No 25 30 Florida Statules 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BLUMENTHAL, HARRY C Street Address (P.O. Box Number is Not Acceptable) 82 300 S.E. 5TH AVENUE 83 **BOCA RATON FL 33432** City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (12/95)12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TILLE 1 1 TITLE Change Addition NAME BENNETT, CRAIN J 1.2 NAME CR2E034 STREET ADDRESS 1649 SE 13TH ST 1.3 STREET ADDRESS FT. LAUDERDALE FL City - ST- ZIP 14 CITY - ST- ZIP DELETE Addition TITLE 2 1 TITLE Change CRAIN, LINDA NAME 22 NAME 1649 SE 13TH ST STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP □ DELETE TITLE 4.1 THILE Change ■ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE TITLE 5. 1 TITLE Change ☐ Addition NAME 5.2 NAME

14. I do 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)(k). Florida Statutes, I further certify that the information indicated on this annual report of 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 affector 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 Bl ent with an address

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

6 1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-S1-21F

CITY-S1-ZIP

TIFLE

NAME

AME OF SIGNING OFFICER OF DIRECTOR

DELETE

Daytime Phone #

☐ Change

■ Addition