## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000045226 (5)

SOUTH BEACH BRONZE, INC.

÷							
Principal Place	of Business	Mailing Address				<b>E</b>	HEID BILL 1981
945 418T, STREET		945 41ST. STREET	945 41ST. STREET			•	
202	P. 8514A	202	200				
MIAMI BEACH FL 33140 US		US	MIAMI BEACH FL 33140-3330 US		3. Date Incorporated or Qualified	3a. Date of La	st Report
•					06/10/1994	05/01/199	
2, Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	<u></u>	Applied For
21		26			65-0548528	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	of Status Desired S8.75 Additional	
City & State		27	City & State		Fee Required		
City & State	9	<del> </del>			6. Election Campaign Financing		00 May Be led to Fees
Zip	Country	<b>28</b>	Country		Trust Fund Contribution  8. This corporation has liability for i		
24	25		30			Yes No	57 S. 193.002,
	9, Name and Address of Curren				10. Name and Address of New Re	jistered Agent	
CHA	RNEY, KEITH		<b>81</b> Na	me	•		
	41ST. STREET		<b>82</b> Str	eet Addro	ess (P.O. Box Number is Not Acceptab	le)	
MAIM	VII BEACH FL 33140						
			83				
			84 Cit	у		FL 85	Zip Code
44 Director	to the provisions of Postions 607 066	02 and 607 1509 Florida Statut	oc the should per	nod corn	oration submits this statement for the p		ng ite registered
office or re	egistered agent, or both, in the State	e of Florida. Such change was a	authorized by the	corporati	on's board of directors. I hereby accep	t the appointmen	t as registered
_	m tamiliar with, and accept the oblig	jations of, Section 607.0505, Fig	orida Statutes.				
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable (NOT)	F flegistered Agent's ge	nature require	ed when reinstaling)	DATE	
12.		ND DIRECTORS	18.		ADDITIONS/CHANGES TO OFFIC		
TITLE	DV	DELETE	1.1 TITLE	PR		☐ Char	nge 🔼 Addition
NAME	CHARNEY, KEITH		1.2 NAME	GAI	LE JEMAL		
STREET ADDRESS	1481 COLLINS AVE MIAMI BEACH FL 33139		1.8 STREET ADDR	ESS S 7	ISO COLLINS ARE HAMI BURCH FL 3	3140	
CITY-ST-ZIP TITLE	DST DEACH PL 33139	<b>□</b> DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Pi	AMI BUILLY PC 3	719℃ □ Char	nge Addition
NAME	CHARNEY, MARILYN	CAL DECEM	2.1 TIPLE 2.2 NAME				ige Addition
STREET ADORESS	1481 COLLINS AVE		2.8 STREET ADDRESS		:	٠,	
CITY-ST-ZIP	MIAMI BEACH FL 33139		2. 4 CITY - S1 - ZIP				
TITLE			3.4 TITLE	1		☐ Char	nge 🔲 Addition
NAME			3.P NAME				
STREET ADDRESS			3.8 STREET ADDR	ESS			i
CITY-ST-ZIP			3.4. CITY - ST - ZIF	·			
TITLE		☐ DELETE	4.4 TITLE			L.j Char	nge L. Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.B STREET ADDR				
CITY-ST-ZIP		DELETE	4.4 CITY-ST-2IP			Char	nge 🔲 Addition
TITLE NAME		L" DETELL	51 TITLE 52 NAME				ige
STREET ADDRESS			5.3 STREET ADDR	150			
CITY-ST-ZIP			5.4 CHY-S1-ZIP	1			
TITLE		DELETE	6.1 TITLE			☐ Chai	nge 🔲 Addition
NAME			6.2 NAME				,
STREET ADORESS			6.3 STREET ADDR	ESS			
CITY-ST-ZIP			6.4 CITY-S1-ZIP				
14. do heret	by certify that the information supplied in indicated on this applied report or	ed with this filing does not quali- supplemental annual report is t	fy for the exempt	ion stated	In Section 119.07(3)(i), Florida Statute my signature shall have the same lega	s. I further certify if effect as if made	that the e under path: that
l am an o appears i	fficer or director of the corporation on Block 12 or Block 13 if changed, or	or the receiver or trustee empow or open attachment with an acc	vered to execute dress.	this repor	t as required by Chapter 607. Florida 5	tatutes; and that	my name