

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # P94000045868 (4)

1. Corporation Name

COLONIAL SHOPPING CENTER, INC.

95 MAY -1 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1655 DREXEL AVE.
SUITE 208
MIAMI BEACH FL 33139

Mailing Address

1655 DREXEL AVE.
SUITE 208
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/16/1994

3a. Date of Last Report

4. FBI Number

65-0502203

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAPPORT, MORRIS
1655 DREXEL AVE.
SUITE 208
MIAMI BEACH FL 33139

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 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 name of registered agent and the corporation)

(Typed Name of Agent registered and when registered)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME RAPPORT, MORRIS
STREET ADDRESS 1655 DREXEL AVE., SUITE 208
CITY, ST, ZIP MIAMI BEACH FL 33139

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

TITLE V
NAME RAPPORT, SUSY
STREET ADDRESS 1655 DREXEL AVE., SUITE 208
CITY, ST, ZIP MIAMI BEACH FL 33139

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

TITLE S
NAME ROSENBERG, JEFFREY
STREET ADDRESS 1655 DREXEL AVE., SUITE 208
CITY, ST, ZIP MIAMI BEACH FL 33139

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

TITLE T
NAME WASERSTEIN, LISA
STREET ADDRESS 1655 DREXEL AVE., SUITE 208
CITY, ST, ZIP MIAMI BEACH FL 33139

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

TITLE T
NAME WASERSTEIN, CARLOS
STREET ADDRESS 1655 DREXEL AVE., SUITE 208
CITY, ST, ZIP MIAMI BEACH FL 33139

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

TITLE T
NAME WASERSTEIN, CARLOS
STREET ADDRESS 1655 DREXEL AVE., SUITE 208
CITY, ST, ZIP MIAMI BEACH FL 33139

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and deemed qualify for the exemption related in Section 119.07(6)(b), Florida Statutes. I further certify that the information submitted 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 this 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 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/95

5. 123 5116