FILED Mar 01, 1999 8:00 am

Secretary of State

03-01-1999 90117 036 ***150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000057222 1. Corporation Name

1999

TABB REAL ESTATE OF FLORIDA, INC.

Mailing Address Principal Place of Business 8893 IBIS LAKES BLVD. 8893 IBIS LAKES BLVD. SHIFE-1600 SUITE 1600 DO NOT WRITE IN THIS SPACE WEST PALM BEACH FL 33412 WEST PALM BEACH FL 33412 3. Date Incorporated or Qualifed 07/29/1994 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business Not Applicable 8893 IBIS LAKES 26 8893 IDIS CAKES BLUD **65-0508747** Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing П Added to Fees Trust Fund Contribution SUST Country This corporation owes the current year Intangible □No USA Personal Property Tax. 29 33412 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MIRANDA, PAULO C Street Address (P.O. Box Number is Not Acceptable) 82 701 BRICKELL AVE. **SUITE 1600** 83 **MIAMI FL 33131** Zip Code 84 85 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ DELETE 11 TITLE TITLE BELLAM, GEORGE 1.2 NAME 8893 FBIS LAILES BLUD NAME BELHAM, GEORGE 1.3 STREET ADDRESS STREET ADDRESS 701 BRICKELL AVE., STE. 1600 1.4 CITY-ST-ZiP CITY-ST-ZIP MIAMI FL 33131 DELETE 21 TM F TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE 4.1 TITLE TITLE 4 2 NAME NAME

CITY-ST-ZIP 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 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, with all other like empowered.

4.3 STREET ADDRESS

53 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

□ DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

CR2E034 (11/98)

Addition

Change