FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY -1 PM 5:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-05/02/95--01145--015
****200.00 ****200.00

DOCUMENT # P94000059800

1. Current Name
Regatta Real Estate Management, Inc.
1235 Meridian Avenue #5
Miami Beach, FL 33139

Principal Place of Business
1235 Meridian Ave. #5
Miami Beach, FL 33139

Mailing Address
same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 8/15/94
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
4. FEI Number: 65-0511467 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

City & State — 23
City & State — 28
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

City — 24
County — 25
Zip — 29
County — 30
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: Timothy VooA
82 Street Address (P.O. Box Number is Not Acceptable): 1235 Meridian Ave. #5
83
84 City: Miami Beach FL 85 Zip Code: 33139

11. Pursuant to the provisions of Section 607.1008, 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: Tim VooA 4/10/95

12. OFFICERS AND DIRECTORS

Title: President
Name: Timothy VooA
Address: 1235 Meridian Ave. #5
City-State-Zip: Miami Beach, FL 33139

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

1. Title ☐ Change ☐ Addition
Name
Address
City-State-Zip

2. Title ☐ Change ☐ Addition
Name
Address
City-State-Zip

3. Title ☐ Change ☐ Addition
Name
Address
City-State-Zip

4. Title ☐ Change ☐ Addition
Name
Address
City-State-Zip

5. Title ☐ Change ☐ Addition
Name
Address
City-State-Zip

6. Title ☐ Change ☐ Addition
Name
Address
City-State-Zip

14. To the best of my knowledge, that the information supplied with this blank is voluntarily furnished and 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 this report will be filed within the time provided by Section 607.1622, Florida Statutes.

SIGNATURE: Tim VooA 4/10/95 305 673-1940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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