

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Dwight B. McWhorter
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

15 MAY 22 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000063461 (5)

SUNCOAST V NO. 5, INC.

1001 SOUTH BAYSHORE DR
STE. 1800
MIAMI FL 33131

1001 SOUTH BAYSHORE DR.
STE. 1800
MIAMI FL 33131

7000001500057
05/30/95 11018-014
2700.00+225.00

3. Date incorporated or qualified	3a. Date of last report
08/24/1994	
4. FIC Number	Applied For
65-0515414	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. 193.01, Florida Statutes.	☐ Yes ☒ No

2. Principal Office of Business	2a. Mailing Address
21. c/o Oppenheim & Associates	26. c/o Oppenheim & Associates
22. Suite Apt. # etc.	27. Suite Apt. # etc.
22. Suite 800	27. Suite 800
23. City & State	28. City & State
23. Miami, FL	28. Miami, FL
24. ZIP Code	29. ZIP Code
24. 33145	29. 33145
25. Country	30. Country
25. USA	30. USA

9. Name and Address of Current Registered Agent

OPPENHEIM, STEVEN P
1110 BRICKELL AVE.
7TH FLOOR
MIAMI FL 33131

10. Name and Address of Now Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
3191 Coral Way, Suite 800
83. City
84. City
Miami
85. ZIP Code
FL 33145

11. I, the undersigned, the person named in Sections 9, 10, and 11 of the Florida Statutes, the above named corporation, submit this statement for the purpose of changing its registered office or registered agent to be 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 consent to the filing of this statement with the Florida Department of State.

SIGNATURE: *Steven P. Oppenheim* Steven P. Oppenheim 5/19/95

12. OFFICERS AND DIRECTORS	13. ADVERTISED CHANGES TO OFFICERS AND DIRECTORS
1. NAME	D/P/T
2. STREET ADDRESS	Camoletto, Sergio
3. CITY	3191 Coral Way, Suite 800
4. STATE	Miami, FL 33145
5. NAME	D/VP/S
6. STREET ADDRESS	Riva, Roberto
7. CITY	3191 Coral Way, Suite 800
8. STATE	Miami, FL 33145
9. NAME	
10. STREET ADDRESS	
11. CITY	
12. STATE	
13. NAME	
14. STREET ADDRESS	
15. CITY	
16. STATE	
17. NAME	
18. STREET ADDRESS	
19. CITY	
20. STATE	
21. NAME	
22. STREET ADDRESS	
23. CITY	
24. STATE	

14. I, the undersigned, certify that the information appearing with this filing is voluntarily furnished and does not equally for the reasons stated in Section 193.01(1)(b), Florida Statutes. I further certify that the information and report on the 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 person or persons named in the report as required by Chapter 867, Florida Statutes, and that my name appears in Block 1, Section 13 of this report as an attachment with an address.

SIGNATURE: *Roberto Riva* Roberto Riva, Vice President 5/19/95 305-867-9100