

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000076971**

1. Corporation Name

DADE COUNTY VENTURES, INC.

Principal Place of Business

ONE WORLD TRADE PLAZA
80 SW EIGHTH ST., SUITE 2400
MIAMI FL 33130
US

Mailing Address

ONE WORLD TRADE PLAZA
80 SW EIGHTH STREET, SUITE 2400
MIAMI FL 33130
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified

10/19/1994

4. FEI Number

65-0533189

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 owes the current year
Intangible Personal Property.



Yes



No

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **MENTZER, CARL**
STREET ADDRESS **SUN BANK/777 BRICKELL AVE.**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **D** ☒ DELETE
NAME **PARLOMARES, CARLOS**
STREET ADDRESS **8750 DORAL BLVD.**
CITY-ST-ZIP **MIAMI FL 33178**

TITLE **D** ☒ DELETE
NAME **HIRSH, RICHARD**
STREET ADDRESS **3000 S.E. FINANCIAL CENTER**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **TS** ☐ DELETE
NAME **NERO, FRANK R**
STREET ADDRESS **80 SW 8TH STREET, #2400**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Jul 28, 1999 8:00 am
Secretary of State

07-28-1999 90008 023 ***158.75



DO NOT WRITE IN THIS SPACE

CR2E034 (5/99)



THE BEACON COUNCIL

597285-90008-23
P. 94 000 076971

Miami-Dade
County's
Official
Economic
Development
Partnership

July 16, 1999

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

80 Southwest
Eighth Street
Suite 2400
Miami,
Florida
33130
Telephone:
305.579.1300
Facsimile:
305.375.0271
[www.beacon
council.com](http://www.beaconcouncil.com)

To Whom It May Concern:

Please accept our sincere apology for the delay in filing of the 1999-profit corporation annual report packet for the Dade County Ventures Inc. FEI # 65-0533189. The reason for the delay being that a first notice was not received at our office.

We have included a check for \$158.75 and respectfully request that you waive the late fee as per the non-receipt of your first notice.

Thanking you in advance for your attention to this matter.

Sincerely,

Chris Davis

cc: Camela Glean-Jones
Executive Vice President and CFO