SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000083169 (0)

SIDNEY PROPERTIES, INC.

FILED Aug 22 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 550 N.W. 29 STREET 550 N.W. 29 STREET MIAMI FL 33127 MIAMI FL 33127 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 11/10/1994 07/17/1996 2. Principal Place of Business 2a. Mailing Address Applied For 150 NW. 176 St 150 NW. 1765+ 26 65-0535904 Not Applicable \$8.75 Additional **5.** Certificate of Status Desired 🐇 - 🔲 Fee Required 22 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ΠNo 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name SIDNEY, ROBERT 1175 101 STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 2 83 **BAY HARBOR FL 33154** 84 City 85 Zip Code 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 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 aprilliar with and accept the Obligations of, Section 69, 0505, Florida Statutes. gistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11TITLE SIDNEY, ROBERT 1.2 NAME 1175 101 STREET, #2 STREET ADDRESS 1.3 STREET ADDRESS **BAY HARBOR FL 33154** CITY-ST-ZIP 1.4 City - ST - ZiP ... DELETE 2.1 TITLE ☐ Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZiP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHTY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I do 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 upper to proper the properties of the proper I am an officer or director of the appears in Block 12 or Block