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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

| | ANNUA | AL REPORT | Sandra B. I Secretary DIVISION OF CO | of State | DNS | | | |
|---|-------------------------------|--|---|--------------------------------|-----------------------------------|--|--|--------------------------------|
| | | MENT # P940 (| 00083268 (0) | 1) | | | | |
| TOWNHOUSE BEACH RESORT, INC. | | | | | | | | |
| | | | | | | | | |
| Principal Place of Business Mailing Address | | | | | | | ! | + |
| 150 20TH ST | | | 1221 71ST ST | | | | | |
| MIAMI BEACH FL 33139 | | | MIAMI BEACH FL 33141 US | | 3. Date Incorporated or Qualified | Tan Dale | of Last Report | |
| | | | | | | 11/15/1994 | | 8/18/1995 |
| | Principal Plac | al Place of Business 2a. Mailing Address 25 | | | | 4. FEI Number 65-0538424 | | Applied For Not Applicable |
| 21 | Suite, Apt. # | | | | | Certificate of Status Desired | | \$8.75 Additional |
| 22 | City & State | | City & State | City & State | | | L.J | Fee Required |
| 23 | City & State | | 28 | F1 | | Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees |
| | Zip | | | | | This corporation has liability for Florida Statutes | intangible ta | ex under s. 199.032, |
| 24 | | 25 29 30 30 3, Name and Address of Current Registered Agent | | | | 10. Name and Address of New F | | Agent |
| | | | | 81 | Name | | | |
| JONAS, DANIEL ESQ 300 71 ST ST | | | | 82 | Street Addr | ess (P.O. Box Number is Not Acceptable) | | |
| STE 210 | | | | 83 | | | | |
| MIAMI BEAHC FL 33141 | | | | 84 | City | FL 85 Zip Code | | |
| 11 | . Pursuant to | the provisions of Sections 607,05 | 02 and 607.1508, Florida Statutes, | the above-r | nanied corpor | ration submits this statement for the pu | | Is registered office |
| | or registere familiar with | ed agent, or both, in the State of Fic n, and accept the obligations of, Se | orida. Such change was authorized action 607.0605, Florida Statutes. | by the corp | oration's boa | ration submits this statement for the purify of directors. I hereby accept the app | ointment as | registereo agent. I am |
| SI | gnature | Signature, typed or printed he he of registered ap- | ertandffckapg∜sabe (NOTE | Flagistered Ager | it signature require | id wher reinstaling) | DATE | |
| 12 | | OFFICERS A | OFFICERS AND DIRECTORS 1. | | | ADDITIONS/CHANGES TO OFF | | |
| TIT NA | | CHEHEBAR, GABRIEL | | 1. 1 TITLE 1.2 NAME | | | I | Change Addition |
| STREET ADDRESS | | 1221 71ST ST | | 1.3 STREET ADORESS | | | | |
| _ | TY-ST-ZIP | MIAMI BEACH FL ST | [] DELETE | 1.4 CHY - S 2. 1 TITLE | 1 - 24F | | | Change Addition |
| NAME STREET ADDRESS | | CHEHEBAR, ROSY | £ J bettit | 2.2 NAME 2.3 STREET ADDRESS | | | , | |
| | | 1221 71ST ST | | | | | | |
| CITY-S1-ZIP TITLE | | MIASMI BEACH FL | DELFTE | 2.4 City - S 3. 1.1ifue | T-ZIP | | | Change Addition |
| NAME | | | hand | 3 2 NAME | | | ' | |
| STREET ADDRESS | | | | 33 STREE | | | | |
| CITY-ST-ZIP TITLE | | Land and the state of the state | DELETE | | 51 - ZIP | | | Change Addition |
| NAME | | | | 4.2 NAME | | | | |
| l | REET ADDRESS | | | 4.3 STREET | | | | |
| TITLE | | | DELE FE | | 01.4TiL | | | Change Addition |
| NAME | | | | 5 2 NAME | | | | |
| | REET ADDRESS | | | 5.3 STREET 5.4 CITY - S | | • | | |
| CITY-ST-ZIP TITLE | | The second secon | ☐ DELETE | | 21.21 | | | Change Addition |
| 1 | ME | | | 6 2 NAME | | | | |
| ı | REET ADDRESS | | | 63 STREET | | | | |
| 14 | 1Y-S1-2/P 4. I do hereby | y certify that the information supplies | ed with this filing is voluntarily furnish | ed and doe | s not quality | for the exemption stated in Section 119 | 0.07(3)(k), FI | orida Statutes. I further |
| | oath: that I | Lam an officer or director of the cor | nnual report or supplemental annual appration or the receiver or trusted e or on an attachment with an addres | moowered | ae and accur to execute th | ale and that my signature shall have the iis report as required by Chapter 607, F | lorida Statu | tes; and that my name |

SIGNATURE:

Rosy CHEHEBAR

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR