

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000086342 (0)**

1. Corporation Name

CORREAWEST CORP.



Principal Place of Business

Mailing Address

~~ONE BISCAYNE TOWER 2 S. BISCAYNE BLVD.~~
~~STE. 3150~~
~~MIAMI FL 33131-1897~~

~~ONE BISCAYNE TOWER 2 S. BISCAYNE BLVD.~~
~~STE. 3150~~
~~MIAMI FL 33131-1897~~

2. Principal Place of Business

2a. Mailing Address

21 **200 S. Biscayne Blvd.**

26 **200 S. Biscayne Blvd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Suite 3150**

27 **Suite 3150**

City & State

City & State

23 **Miami, Florida**

28 **Miami, Florida**

Zip

Country

Zip

Country

24 **33131**

25 **USA**

29 **33131**

30 **USA**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/29/1994

3a. Date of Last Report

05/23/1995

4. FET Number

65-0537042

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 has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

SCHULTZ, STEVEN A

~~ONE BISCAYNE TOWER 2 S. BISCAYNE BLVD.~~
~~STE. 3150~~
~~MIAMI FL 33131-1897~~

10. Name and Address of New Registered Agent

81 Name

Steven A. Schultz

82 Street Address (P.O. Box Number is Not Acceptable)

200 S. Biscayne Blvd.

83

Suite 3150

84

City

Miami, Florida

FL

85

Zip Code

33131

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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of principal officer or director and registered agent

(NOTE: Registered Agent should be named when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VSTD** ☐ DELETE
NAME **SCHULTZ, STEVEN A**
STREET ADDRESS **ONE BISCAYNE TOWER 2 S. BISCAYNE BLVD.**
CITY-ST-ZIP **MIAMI FL**

TITLE **P** ☐ DELETE
NAME **BALBI, FIORELLA**
STREET ADDRESS **3163 INVERNESS**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 **VSTD** ☒ Change ☐ Addition
1.2 NAME **Steven A. Schultz**
1.3 STREET ADDRESS **200 S. Biscayne Blvd., Ste 3150**
1.4 CITY-ST-ZIP **Miami, Florida 33131**

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Steven A. Schultz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Steven A. Schultz

4/16/96 (305) 377-1572
DATE AND PHONE #

CR2E034 (12/95)