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

PROFIT CORPORATION ANNUAL REPORT



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

CORAL GABLES FL 33134

1996

CORAL GABLES FL 33134

P95000000574 (0) **DOCUMENT #** Corporation Name

DOWNTOWN BUILDING, INC.

Principal Place of Business Mailing Address 201 ALHAMBRA CIR 8TH FLOOR 201 ALHAMBRA CIR 8TH FLOOR



						3. Date Incorporated or Qualified 3a. Date of Last Report 01/04/1995				
2 Principal i	Place of Business	2a. Mailing Addres				4. FEI Number	L	1 1	pplied For	
21	rade of Edamess	26 26	٦ -			65-0546050			lot Applicable	
Suite, Apt	t # atc	Suite, Apt. #, 6	de							
22	. +, 610.	27				5. Certificate of Status Desired	sired \$8.75 Additional Fee Required			
Oity & Sta	ate	Orty & State	Orty & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country 25	<i>Ζ</i> φ	Country 30			8. This corporation has liability for in Elorida Statutes		under s	199.032,	
24	9. Name and Address of Currer		1301			10. Name and Address of New Re		aent		
				81 N	lame		3.0.0.0	3		
KRONGOLD, M RONALD										
	LHAMBRA CIR 8TH FLOOR			82 Street Address (P.O. Box Number is Not Acceptable)						
	L GABLES FL 33134			83						
				84 C	Dity		FL	85 Zq	Code	
or regist	it to the provisions of Sections 607.050; tered agent, or both, in the State of Flori with, and accept the obligations of, Sec	ida. Such change was au	ithorized by the o	ve-nan orpora	ned corpora tion's board	tion submits this statement for the puri d of directors. I hereby accept the appo	ouse of cha intment as	nging its re registered	egistered office agent. I am	
SIGNATURE	Skynature typed or printed hen a of registional ages	Land the dappin at a	(North Rayledened	Age 1 su	nalize regimeds	wher renstate g	ĎΑŁΕ			
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTO	RS IN 12	
TITLE	D	DELET	E 11TI	I.E] Change	Addition	
NAME	KRONGOLD, M RONALD		1.2 NA	ME						
STREET ADDRESS	ANA ALLIANODA OID ATLA FI	LOOR	1	REET ADI	ORESS				RS IN 12 Addition	
CITY+S1+ZIF	CORAL GABLES FL 33134			Y-ST-7						
TITLE	00172 0722012 00101	DELET						7 Change	Addition Addition	
NAME			2 2 NA			resident	L	J •	-X	
	.				M,	. Ronald Krongold	011 27			
STREET ADDRESS	⁵			REET ADO	JH(55 Z(01 Alhambra Circle,	8th Fl	.00r		
CITY - ST - ZIP		□ DELET		Y-S1-2		oral Gables, FL 331		7 Change	- Add tion	
TITLE		☐ Deter			Vr Xi	ice President teven Brown	L] Change	Addition	
NAME			3.2 NA				. Ра			
STREET ADDRESS	S			REET AD	41	o Krongold and Todd I Alhambra Circle,	8th F1	.oor		
CITY - ST - ZIP				Y - SI - Z		oral Gables, FL 331	.34			
TITLE		☐ DELET	3		5/1 Se	ecretary/Treasurer	L	_ Change	Addition	
NAME			4.2 NA	ME		ichael Meyers O Krongold and Todd	1			
STREET ADDRESS	S		4 3 ST	REEL AD:	DRESS 20	Ol Alhambra Circle,	8th Fl	.oor		
CITY - ST - ZIP				1Y-ST-Z	if C	oral Gables, FL 331	.34			
TITLE		DELE?	E 5 1 TI	TLF.] Change	☐ Addition	
NAME			5.2 NA	ME						
STREET ADDRESS	s		5381	REET ADI	DRESS					
CITY-ST-ZIP			5.4.01	1Y-S1-Z	1P					
TITLE		DELET					Ξ	Change	Addition	
NAME			6.2 NA	Mi			_			
STREET ADDRESS	e			REET ADI	TIBESS					
	3				1					
CITY-ST-ZIP	<u>L</u>		■ 6.4 CI	1Y-\$1-7	m1_1					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality 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 trusted 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 attach jumphyith an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M-ROWALD KRONGOLD Pres 4/22/46

305-446-3033