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

1996

DOCUMENT # P9500004938 (3)

PORTOFINO REALTY, INC.

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Principal Place of Business		Mailing Address		E INDRINDULLIN INIMI AND MAINE ADDIN ADDIN ADDIN DOUGH ADDIN DINIMI NOTAE HELD INCH TO IN THE PART TO A THE PART T	
446 COLLINS AVENUE MIAMI BEACH FL 33139		446 COLLINS AVENUE MIAMI BEACH FL 33139			
				01/19/1995	ate of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address 26		4. FEI Number 65 - 056483	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
Crty & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζ ιρ	Country	Zip	Country	8. This corporation has liability for intangible	
24	25	29	30]	Florida Statutes Yes No. 10. Name and Address of New Registers	od Agent
	9. Name and Address of Curr	ent Hegistered Agent	81 Name 🕢	10. Name and Address of New Registers	a nyent
			Kc	BEAT THREALL	.,
HART, BRIAN A 82 Street Addre				ress (P.O. Box Number is Not Acceptable) Collins AVE	
	UTHEAST THIRD AVENUE 171	IM FLOOR	83 44 0	CONTRACTOR CONTRACTOR	
MIAMI FI	L 33131				
			84 CityM	ami BEACH F	L 18 23739
11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the above named corpo	ration submits this stalement for the purpose of	changing its registered office
or register	ed agent, or both, in the State of Fix th, and accept the objections of Se	onda. Such change was authona	rea by the corporation's boa	introl preditors, a titre by accept the appointment	as registered agents rain
SIGNATURE.	Rul A 11 Mm	ent Robe		3/19/9	16
SIGNATURE	Digital C. I/problem 7	ent and title if applicable (N	DIE: Ragisterud Agent Signar inchesion	Twhereforestatings Financial	i
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1 11111.	P, D	
NAME	KRAMER, THOMAS		1.2 NAME	Thomas Kramer	[8]
STREET ADORESS	446 COLLINS AVENUE		1.3 STREET ADDRESS	446 Collins Avenue	room of
CITY - S1 - ZIP	MIAMI BEACH FL 33139	[] DELETE	1.4 C/TY-ST-ZIP 2.1 T/TLE	Miami Beach FL 33139	Change Addition
TITLE		[] been	2.2 NAME	VP	
NAME DZOSCE UDDDSSGG			2.3 STREET ADDRESS	Hanau, H.	
STREET ADDRESS			2.4 CiTY-S*-7iP	446 Collins Avenue	
CITY - ST - ZIP		DELETE	3 1 TOLE	Miami-Beach FL 33139 VPS	Change X Addition
NAME			3 2 NAME	Nee, M.	
STREET ADDRESS			3.3 STREET ADDRESS	446 Collins Avenue	
CiTY-ST-ZiP			3.4 CHY-ST-ZIF	- Miami Beach FL 33139	
1ITLE		☐ DELETE	4. 1 TILLE	VP	Change 🙀 Addition
NAME			4.2 NAME	Colonnese, C.	
STREET ADDRESS	1		4.3 STREET ADDRESS	446 Collins Avenue	
CITY-ST-ZIP			4 4 CITY - ST - ZIP	Miami-Beach FL-33139	Cl Change Cl Addison
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
C(1Y - ST - Z(P		☐ DELETE	5 4 C/TY - ST - Z/P		Change Addition
TITLE	İ	☐ DECE IE	6 1 TITLE		C) brands [] require (
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CiTY-ST-ZIP	1		64 CHY+ST-7IP		

14. Ido 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 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/96 305-532-2519