

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000009456 (1)

1. Corporation Name
MSWH SUB I, INC.



Principal Place of Business
700 N.W. 107 AVE.
MIAMI FL 33172

Mailing Address
700 N.W. 107 AVE.
MIAMI FL 33172

3. Date Incorporated or Qualified
02/03/1995

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

4. FEI Number
65-0552136

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
WATSKY, MORRIS J
700 N.W. 107 AVE.
MIAMI FL 33172

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

D MILLER, LEONARD
700 N.W. 107 AVE.
MIAMI FL 33172

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

D BOLOTIN, IRVING
700 N.W. 107 AVE.
MIAMI FL 33172

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

D COLE, ROBERT B
700 N.W. 107 AVE.
MIAMI FL 33172

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

D PEKOR, ALLAN J
700 N.W. 107 AVE.
MIAMI FL 33172

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-STATE-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-ZIP

AS
Sierra, Kathleen E.
700 N.W. 107 Ave.
Miami, FL 33172

Bank deposit \$200.00

14. I do hereby certify that the information supplied to the 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 included on this annual report or supplement or 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 person or persons 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 in an attachment with an address.

SIGNATURE: Kathleen E. Sierra
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Kathleen E. Sierra
4/4/96 (305) 229-6400

CR2E034 (12/95)