FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000065368 (9)

BACK BAY CONSTRUCTION CORPORATION

Principal Place of Business Mailing Address				
340 MINORCA AVE 340 MINORCA AVE				
STE 6		STE 6	104	DO NOT WRITE IN THIS SPACE
CORAL GABLES FL 33134 CORAL US		CORAL GABLES FL 331	34	3. Date Incorporated or Qualified
-				08/23/1995
2. Principat P	face of Business	2a, Mailing Address		4. FEI Number Applied For
21		26		65-0603057 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be
Z ID	Country	28 Zip	Country	Trust Fund Contribution
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	g, Name and Address of Curren		30]	10. Name and Address of New Registered Agent
WE	INBAUM, MARK		81 Nam	
	MINORCA AVE		20 0	Address (D.O. D., M. mbasis Mat Assessable)
STE 6			62 Stree	et Address (P.O. Box Number is Not Acceptable)
1	RAL GABLES FL 33134		83	
			84 City	- 85 Zip Code
				FL [] \
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE	<u></u>			
12.	Styrature, typed or printed name of registered agn OFFICERS ANI		OTE: Register Agent signat	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D OFFICERS AND	DELETE	1.1 THE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	WEINBAUM, MARK	•	1.2 NAME	
STREET ADORESS	1235 SW 22ND ST., SUITE 20)3	1.3 STREET ADDRESS	s
CITY-ST-ZIP	MIAMI FL 33145-2935		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	Change Addition
NAME	WEINBAUM, JOAN		2.2 NAME	
STREET ADDRESS	1235 SW 22ND ST., SUITE 20)3	2.3 STREET ADDRESS	s
CITY-ST-ZIP	MIAMI FL 33145-2935		2. 4 CiTY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	WEINBAUM, ADAM		3.2 NAME	
STREET ADORESS	1235 SW 22ND ST., SUITE 20	13	3 3 STREET ADDRESS	3
CITY-S1-ZIP	MIAMI FL 33145-2935		3.4. CITY+ST-ZIP	
TATLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	5
CITY - ST - ZiP		Dr. coc	4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	5
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP	Change Addition
TITLE		☐ DETE IF	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	·

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 of 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 of an attachment with any address.

SIGNATURE:

MARY WELDER 412/98 305-

FILED

Apr 17 1998 8:00am

Secretary of State