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

Mailing Address

% SAMUEL C. ULLMAN

MIAMI FL 33131-2378

2a, Mailing Address

27

Suite, Apt. #, etc.

201 S. BISCAYNE BLVD., SUITE 2400

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

MIAM! FL 33131

21

16 SAMUEL C. ULLMAN 201 S. BISCAYNE BLVD., SUITE 2400



**FILED** 

Apr 04 1997 8:00am

Secretary of State

3a. Date of Last Report 05/01/1996

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified

5. Certificate of Status Desired

11/14/1995

65-0629020

4. FEI Number

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000087446 (7)

PARC PLAZA DEVELOPERS, INC.

City & State	24	City & State	City & State			Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution		Added	to Fees
7ip 24	Country 25	Ζφ <b>29</b>	Coun <b>30</b>	itry		<b>8.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
9. Name and Address of Current Registered Agent						10. Name and Address of New	v Registered	Agent	···········
ULLMAN, SAMUEL C					Name				
% KELLEY DRYE & WARREN 201 S. BISCAYNE BLVD., SUITE 2400 MIAMI FL 33131					Street Address (P.O. Box Number is Not Acceptable)				
						, , , , , , , , , , , , , , , , , , ,			
			-  -	84	City	· · · · · · · · · · · · · · · · · · ·	<del></del>	<b>85</b> Zip (	Code
					Oity		FL	,   65   Z.IP	Code
office or n	to the provisions of Sections 607.050 og stered agent, or both, in the State m fam liar with, and accept the oblig	of Florida. Such change	was authorized	bv	the corporatio	ration submits this statement for n's board of directors. I hereby a	the purpose o locept the app	f changing it pointment as	is registered registered
SIGNATURE	Signature, typed or printed name of registered age	er and the fluority and	(NOTE Registered	Aonr	nt cionat es mayiend	(when principal po)	DATE		
12.	OFFICERS AND DIRECTORS 13.			nyai	ik algitatore regolies	ADDITIONS/CHANGES TO C		DIRECTOR	3S IN 12
TULE	P	The state of the s		1.1 TITLE				Change	Addition
NAME			1.2 NAN	ИE					
STREET ACCORESS	2555 COLLINS AVE. C-1		1.3 STR	1.3 STREET ADDRESS					
CHT-ST ZIP	MIAMI BEACH FL			Y-ST	f-ZIP				
TI*LE	T TOTAL TOTAL	DETE.	IE 2.1 TITL	2.1 TITLE				☐ Change	Addition
NAME SHAPM	SS 255 COLLINS AVENUE C-1			2.2 NAME					
STREET ACCIDESS				EET A	ADDRESS				
City - St - 70°	MIAMI BEACH FL S	□ B((c)	2 4 017	***************************************	1-21P		····	T1 6	T
31°LF	FELIX SABATES	☐ DELE						Change	L. Addition
NAME CLOSE E ACHOR SO	ACC COLLING AVE C 4		3.2 NAM		********				
STREET ACTURESS	MIAMI BEACH FL				ADDRESS				
0/1Y - S1 - 7/0 1/1/1	OM	DELE:	3.4, C/T	_	1-214			Change	Addition
NAME	SILVIA COLTRANE		4. 2 NAJ					•-	
STHELT ADDRESS	2555 COLLINS AVE. C-1		4.3 STR	4.3 STREET ADDRESS					
City S* 7iP	MIAMI BEACH FL		4.4 CITY	Y-ST	r-ZIP				
Truf	The second of th	DELE	TE 5.1 TITL	.E				Change	Addition
NAME			5.2 NAM	ИE					
SUBERT ADDRESS			5.3 STR	EET A	ADDRESS				
C-17 - SE - ZIP			5.4 CITY		r- ZIP				
II, I E		DELETE 6.1						Change	Addition
NAME			6.2 NAM			•			
STREET ADDRESS					ADDRESS				
C!(Y+S1+7)P	by certify that the information supplie	of with this filling stone and	6.4 City			in Contion 110 07/2\/ii\ Elorida Ct	ntidos I fudho	r cortifu that	tha
ir formatio	is indicated on this annual resport or s flicer or director of the corporation or n Block 12 or Block 13 if changed, o	supplemental annual repo the receiver or trustee e r on an attachment with a	ort is true and ac impowered to ex an address.	(ecui	rate and that nute this report	ny signature shall have the same as required by Chapter 607, Flor	legal effect as	s if made un	der oath: that I
SIGNAT	URE:	PRINTED NAME OF SIGNING O	ELLIA FFICER OR DIRECTO	) DR	a V-	Date	<u></u>	Jaylinio Phone #	