

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000090918 (0)

1. Corporation Name

1000 BAY DRIVE CORPORATION



Principal Place of Business

Mailing Address

~~1428 BRICKELL AVENUE
6TH FLOOR
MIAMI FL 33131~~

~~1428 BRICKELL AVENUE
6TH FLOOR
MIAMI FL 33131~~

3. Date Incorporated or Qualified
11/29/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 c/o Ronen Glazer

26 c/o Ronen Glazer

4. FEI Number

65-0628924

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 4 East 28th Street

27 4 East 28th Street

City & State

City & State

23 New York, NY

28 New York, NY

Zip

Country

Zip

Country

24 USA

29 10016

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KASDIN, NEISEN O ESQ.
1428 BRICKELL AVENUE
6TH FLOOR
MIAMI FL 33131

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 607.1508, 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.

SIGNATURE

Signature, typed or printed name of registered agent and state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME P
GLAZER, RONAN
STREET ADDRESS % 1428 BRICKELL AVE. 6TH FLOOR
CITY-STATE-ZIP MIAMI FL 33131

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Glazer, Ronen
1.3 STREET ADDRESS c/o The Latham Hotel, 4 E. 28th Street
1.4 CITY-STATE-ZIP New York, New York 10016

TITLE ☐ DELETE

NAME SV
BEIT-HA-ACHAMI, DAVID
STREET ADDRESS % 1428 BRICKELL AVE. 6TH FLOOR
CITY-STATE-ZIP MIAMI FL 33131

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Beit-Halachami, David
2.3 STREET ADDRESS c/o The Latham Hotel, 4 E. 28th Street
2.4 CITY-STATE-ZIP New York, New York 10016

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do 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 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 on an attachment with an address.

SIGNATURE:

, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone #

CR2E034 (12/95)