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May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # P95000095040 (8)

1. Corporation Name
WATERWAYS DEVELOPMENT, INC.

Principal Place of Business
11934 S.W. 208 TERRACE
MIAMI FL 33177

Mailing Address
11934 S.W. 208 TERRACE
MIAMI FL 33177-5321

3. Date Incorporated or Qualified: 12/08/1995
3a. Date of Last Report: 06/14/1996

2. Principal Place of Business
21 15292 SW 17 ST.
Suite, Apt. #, etc
22
City & State
23 DAVIE FL
Zip
24 33326
Country
25 BROWARD

2a. Mailing Address
26 15292 SW 17 ST.
Suite, Apt. #, etc.
27
City & State
28 DAVIE FL
Zip
29 33326
Country
30 FL

4. FEI Number: 65-0627342 ☐ 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

9. Name and Address of Current Registered Agent

ROBBINS, CHARLES D
WAMPLER, BUCHANAN & BREEN, P.A.
900 SUNTRUST BLDG., 777 BRICKELL AVE.
MIAMI FL 33131

10. Name and Address of New Registered Agent

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GOLAN, AMNON		1.2 NAME	
STREET ADDRESS	3111 STERLING RD., #B-132		1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33312		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GOLAN, DINA		2.2 NAME	
STREET ADDRESS	3111 STERLING RD., #B-132		2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33312		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	DAVENPORT, RICHARD		3.2 NAME	
STREET ADDRESS	~~8270 SW 180 ST.~~		3.3 STREET ADDRESS	8715 SW 150 CT. CIR. North
CITY-ST-ZIP	~~MIAMI FL 33312~~		3.4 CITY-ST-ZIP	MIAMI Fl 33196
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	DAVENPORT, J. STEVEN		4.2 NAME	
STREET ADDRESS	18065 SW 82 AVE.		4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33157		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do 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 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: [signature] 4/23/97 954-382-0020

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #