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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000095087 (9)

THE OCEANBAY REAL ESTATE COMPANY

Principal Place of Business Mailing Address 4534 SHERIDAN AVENUE 4534 SHERIDAN AVENUE MIAMI BEACH FL 33140 MIAMI BEACH FL 33140-3145 3. Date Incorporated or Qualified 3a, Date of Last Report 01/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For T2 IT. 1393 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 10 H -Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 23 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 29 Yes No 30 25 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD Name 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 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 5 gnature Types or pricred name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSTD DELETE TITLE 1.1 TITLE Change Addition POLEDRI, ALBERT E JR. NAME 1.2 NAME 4534 SHERIDAN AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33140 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TOUR 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-\$1-ZIP 2 4 City-ST-ZIP DELETE TITLE 31 TITLE ☐ Change Addition NAME 32 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Till F 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 51 100 8 Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

61 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-7:P

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

SIGNATURE AND TYPED OF

DELETE

**FILED** 

Feb 05 1997 8:00am

Secretary of State

Change

☐ Addition