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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Apr 09 1997 8:00am

Secretary of State

(305) 678-8206

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P9600006823 (4)

SEA VIEW PROPERTIES, INC.

Principal Place of Business Mailing Address 8200 SOUTH DADELAND BLVD. 9200 SOUTH DADELAND BLVD. SUITE 617 SUITE 817 MIAMI FL 33156 MIAMI FL 33156-2766 3. Date Incorporated or Qualified 3a. Date of Last Report 01/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0640104 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Z_{10} Country Country This corporation has liability for intangible tax under s. 199.032, 30 24 25 29 Florida Statutes Yes | 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREEN, JERRY 9200 SOUTH DADELAND BLVD. Street Address (P.O. Box Number is Not Acceptable) SUITE 617 83 **MIAMI FL 33156** 84 City Zip Code 11. Pursuant to the provisions of Sections 607,0002 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 (NOTE Registered Agent signature required when reinstating) Signature, typical or printed name of regressived agont and trie if applicable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE Sec-Trea DELETE 1.1 DILE Change Addition Dir/P/Asst HANS K. ROEDER 1.2 NAME 9200 So. Dadeland Blvd.#617 STHEE! ACORESIS 1.3 STREET ADDRESS Miami, FL 33156 1.4 CITY-ST-ZIP VP/S/T DELETE THILE 2.1 TITLE ☐ Change Addition NAME 2.2 NAME Jerry Green STREET ADDRESS 9200 So Dadeland Blvd. #617 2.3 STREET ADDRESS City - S* - 7iP 2. 4 CITY-ST-ZIP Miami, FL 33156 DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CUTY - \$1 - 20F 3.4 CITY-ST-ZIP DELETE TETEF 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-SI-ZIE 4.4 CITY - ST - ZIP DELETE THEF 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZiP 5.4 CITY-ST-ZIP DELETE Change Addition THUE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS. 6.3 STREET ADDRESS 64 CITY-ST-ZIP 14. I do hereby cort by 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 supplicational 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 receive 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 appear of the corporation or the received with an address.