

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

FILED
Mar 17 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 # P96000027199 (4)

1. Corporation Name
72ND ST. FINA INC.



Principal Place of Business
960 SUNTRUST INTERNATIONAL CENTER
1 SOUTHEAST 3RD AVENUE
MIAMI FL 33131

Mailing Address
960 SUNTRUST INTERNATIONAL CENTER
1 SOUTHEAST 3RD AVENUE
MIAMI FL 33131-700

2. Principal Place of Business
21 1 S.E. 3rd Ave
22 Ste 960
23 Miami FL
24 33131 25 USA

2a. Mailing Address
26 1 S.E. 3rd Ave
27 Ste 960
28 Miami FL
29 33131 30 U.S.A

3. Date Incorporated or Qualified 03/27/1996
3a. Date of Last Report
4. Filing Number Applied For
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
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
ROZENCHWAG, LESLIE A
960 SUNTRUST INTERNATIONAL CENTER
1 SOUTHEAST 3RD AVENUE
MIAMI FL 33131

81 Name Leslie A. Rozenchwag
82 Street Address (P.O. Box Number is Not Acceptable) 1 S.E. 3rd Ave
83 Ste 960
84 City Miami FL 85 Zip Code 33131

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

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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]

CR2E034 (9/96)