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

FILED Jul 08 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION . Sandra B. Murtham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name P96000039704 (7) REEF HOTEL MANAGEMENT CORP. Principal Place of Business Mailing Address 935 SO. ATLANTIC AVE. 19052 NE 29TH AVE. DAYTONA 8CH. FL 32118 AVENTURA FL 33180-2802 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/08/1996 2. Principal Place of Business 2a. Mailing Address Applied For 17201 Calins Ave 17201 Collins Ave 26 59-3377639 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State Election Campaign Financing \$5.00 May Be Sunny ISICS Trust Fund Contribution Vanc Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 33160 USA 33160 USA Personal Property Tax due June 30. ☐ No 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 KOBERT, ILENE くのさこ 19052 NE 29TH AVE. Box Number is Not Acceptable) 82 . AVENTURA FL 33180 63 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 agent, any application of section 607.0505, Florida Statutes.

SIGNATURE SIGNATURE gent and title if applicable (NOTF Registered Agent signature required when reinstating) OFFICERS AND DIFFICTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE 1.1 TITLE TITLE KATZ, DAVID NAME 1.2 NAME CR2E034 19052 NE 29TH AVE. STREET ADDRESS 1.3 STREET ADDRESS **AVENTURA FL 33180** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE KATZ, JOYCE NAME 2.2 NAME 19052 NE 29TH AVE 2.3 STREET ADDRESS STREET ADDRESS AVENTURA FL 33180 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE KOBERT, ILENE NAME 3.2 NAME STREET ADDRESS 1**90**52 NE 29TH AVE. 3.3 STREET ADDRESS **AVENTURA FL 33180** CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Addition TITLE 4.1 TOLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

CITY - ST - ZIP 6.4 CITY-ST-ZIP 14. I 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 chapter on an attachment with an address.

4.4 City-ST-ZIF

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

CITY - ST - ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

TITLE

NAME

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Addition