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FILED

Feb 09 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000041735 (7)

1. Corporation Name
SAME, INC.

Principal Place of Business
2601 SOUTH BAYSHORE DRIVE
SUITE 1900
MIAMI FL 33133

Mailing Address
2601 SOUTH BAYSHORE DRIVE
SUITE 1900
MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/15/1996

4. FEI Number

65-0668833

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COBER CORPORATE AGENTS, INC.
2601 SOUTH BAYSHORE DRIVE
19TH FLOOR
MIAMI FL 33133

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

TITLE D ☐ DELETE

NAME COHEN, JEFFREY M
STREET ADDRESS 2601 SOUTH BAYSHORE DR STE 1900
CITY-ST-ZIP MIAMI FL 33133

TITLE SD ☐ DELETE

NAME BERKE, MICHAEL A
STREET ADDRESS 2601 SOUTH BAYSHORE DR STE 1900
CITY-ST-ZIP MIAMI FL

TITLE DP ☐ DELETE

NAME BERNSTEIN, RICHARD N
STREET ADDRESS 2601 SOUTH BAYSHORE DR STE 1900
CITY-ST-ZIP MIAMI FL

TITLE D ☐ DELETE

NAME BRODIE, STEVEN J
STREET ADDRESS 2601 SOUTH BAYSHORE DR STE 1900
CITY-ST-ZIP MIAMI FL 33133

TITLE D ☐ DELETE

NAME KONDELL, KAREN P
STREET ADDRESS 2601 SOUTH BAYSHORE DR STE 1900
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ DELETE

NAME
STREET ADDRESS
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

DVP
BERNSTEIN, RICHARD N.
2601 South Bayshore Dr Ste 1900
Miami FL 33133

DP
KONDELL, KAREN P
2601 South Bayshore Dr Ste 1900
Miami FL 33133

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 changed, or on an attachment with an address.

SIGNATURE:

1/28/93

(305) 854-5900

CR2E034 (10/97)