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

2601 SOUTH BAYSHORE DRIVE

MIAMI FL 33133-5461

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 98 FEB 18 PM 4: 11 1998 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # P96000042433 (8) ATLANTIC GULF RECEIVABLES CORPORATION Principal Place of Business Mailing Address 2601 SOUTH BAYSHORE DRIVE 2601 SOUTH BAYSHORE DRIVE MIAM! FL 33133-5461 MIAMI FL 33133-5461 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 2601 S. Bayshore Drive 65-0667549 Not Applicable 21 Suite, Apt. #, etc. Legal Dept., Suite 900 Suite, Apt. #, etc. \$8.75 Additional Ø 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Miami, Florida 23 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 33133 30 Personal Property Tax due June 30. Yes ☐ No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOLDMAN, JOEL K 2601 SOUTH BAYSHORE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) 9TH FLOOR 63 MIAMI FL 33133-5461 City 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 agont and title if applicable (NOTE: Registered Agent signature required when rainstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ Change ☐ Addition PD DELETE TITLE 1.1 TITLE JEFFREY, THOMAS W NAME 1.2 NAME 800002435718--0 2601 SOUTH BAYSHORE DRIVE STREET ADDRESS 1,3 STREET ADDRESS -02/19/98--01104--022 MIAMI FL 33133-5461 CITY-ST-ZIF 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE NAME LANGLEY, MARCIA H 2.2 NAME 2601 SOUTH BAYSHORE DRIVE STREET ADDRESS 23 STREET ADDRESS MIAMI FL 33133-5461 2. 4 CITY - ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 31 TITLE NAME FISCHER, JOHN H 3.2 NAME 2601 SOUTH BAYSHORE DRIVE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33133-5461 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE NAME GOLDMAN, JOEL K 4. 2 NAME 2601 SOUTH BAYSHORE DRIVE STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 33133-5461 CITY-ST-ZIP 4.4 CITY-ST-ZIP **X** DELETE Change VCAS K Addition **VCAS** 5.1 TITLE TITLE CARLETON, CALLIS Cook, Paula NAME 5.2 NAME

Miami, Florida 33133 d in Section 119.07(3)(i), Florida Statute 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

2601 S. Bayshore Drive

<u>Miami, Florida 33133</u>

Laguardia, John 2601 S.Bayshore Drive **72E034**

Change

2. C. D59 UM

X Addition