

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000049668**

1. Entity Name

OCEAN DRIVE PROPERTIES, INC.**FILED**
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91600 046 ***150.00

552605

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**6898 SOUTHWEST 130 TERRACE
PINE CREST FL 33156**Mailing Address
**6898 SOUTHWEST 130 TERRACE
PINE CREST FL 33156**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0671007**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE **PD** ☐ Delete
NAME **MAZZARESE, JOSEPH ANTHONY**
STREET ADDRESS **6898 SOUTHWEST 130 TERRACE**
CITY-ST-ZIP **PINE CREST FL 33156**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **STD** ☐ Delete
NAME **MAZZARESE, NEYSA NELMS**
STREET ADDRESS **6898 SOUTHWEST 130 TERRACE**
CITY-ST-ZIP **PINE CREST FL 33156**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH A. MAZZARESE, PRES. APR. 4, 2001

Date

Daytime Phone #

305-2332018

CR2E034 (10/00)

Attachment

Doc# P96000049668

552605

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

PROFIT CORPORATION
ANNUAL REPORT



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

1998 2001

DOCUMENT # P96000049668 (2)

OCEAN DRIVE PROPERTIES, INC.



2. Principal Office and Business
6896 SOUTHWEST 130 TERRACE
PINE CREST FL 33156

2a. Mailing Address
6896 SOUTHWEST 130 TERRACE
PINE CREST FL 33156

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified

06/11/1996

4. FET Number

65-0671007

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Finance and Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year's personal property tax due June 30

Yes [] No [X]

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 State

11. I, the undersigned, being a resident of Sections 607, 2009 and 607, 1508 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent and its principal office and business in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment of the registered agent and principal office and business of Section 607, 0506 Florida Statutes.

12. OFFICERS AND DIRECTORS

PO MAZZARESE, JOSEPH ANTHONY
6896 SOUTHWEST 130 TERRACE
PINE CREST FL 33156
STD MAZZARESE, NEYSA NELMS
6896 SOUTHWEST 130 TERRACE
PINE CREST FL 33156

13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY STATE ZIP
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY STATE ZIP
19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY STATE ZIP
23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY STATE ZIP
27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY STATE ZIP

Please USE THIS COPY FOR 2001 4/22/01

4/22/2001 305 3101308

SIGNATURE:

J. MAZZARESE PRES.

7/3/98 305 7101799

CR2E034 10/97