

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

FILED
Jun 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000050319 (8)

1. Corporation Name
TOURISM DEVELOPMENT INTERNATIONAL OF MIAMI, INC.

Principal Place of Business
9200 S. DADELAND BLVD., #825
MIAMI FL 33156

Mailing Address
9200 S. DADELAND BLVD., #825
MIAMI FL 33156



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 9. Name and Address of Current Registered Agent

O'LEARY, G. DAVID
9200 S. DADELAND BLVD., #825
MIAMI FL 33156

3. Date Incorporated or Qualified

06/10/1996 65-0785186

4. FEI Number 65-0785186
APPLIED FOR

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

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 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 type for printed name of registered agent and if applicable

(None) Registered Agent sign

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME BURKE, ROBERT
STREET ADDRESS 9200 S. DADELAND BLVD., #825
CITY-ST-ZIP MIAMI FL 33156

TITLE TD
NAME BURKE, JEANETTE
STREET ADDRESS 9200 S. DADELAND BLVD., #825
CITY-ST-ZIP MIAMI FL 33156

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
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 changed, or on an attachment with an address.

SIGNATURE:

Richard A. Stummer, Pres 4/28/98 (305) 620-3025

PSTD
Stummer, Richard A.
9200 S. Dadeland Blvd, PM SUITE
Miami, Fla. 33156 825

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