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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600051510

OCEAN REEF CAPITAL MANAGEMENT, INC.

Principal Place of Business

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90077 046 ***150.00



	, or Buomicoo				
3725 SW 30 AV		3725 SW 30 AVENUE FORT LAUDERDALE FL 33312			
FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
		<u></u>		06/17/1996	
2. Principal Pl	ace of Business	2a. Mailing Address	- 44	4. FEI Number	Applied For
21 535	8 SW 3/4 TELLACE		34 ^{LL} 1000A	Ace 65-0761499	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23 HOUL	yusop, E	28 Houyeson h	· ·	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye	
24 <i>3331</i>	2 25 USA	29 333/2 30	USA	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Current I	Registered Agent	04 4	10. Name and Address of New Regis	ered Agent
FORMOGA TANKAN				FRIEDMAN, ALBORT	
ESPINOSA, TANIA N				Address (P.O. Box Number is Not Acceptable)	
3725 SW 30 AVENUE				_ 5358 SW 34 TERRACE	<u>;</u>
FORT LAUDERDALE FL 33312					
			84 City	11	FL 85 Zip Code 333/2
/ / /				Horrywood	FL 33312
11. Pursuant to the provisions of Sections 607/0592 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 deligations of Section 607.0505, Florida Statutes.					
agent. I a	m familiar with, and a cept the duligation	ns of Section 607.0505, Florida	Statutes.		
SIGNATURE					
	Signature, typed or printed name of registered agents	1		equired when reinstating) ADDITIONS/CHANGES TO OFFICEI	ATE DE AND DIDECTORS IN 12
12.	OFFICEAS AND	DIRECTORS DELETE	13. 1.1 TITLE		Change Addition
TITLE	D 1	Detele		D CACHEON	Ar ournings -
NAME :	LEKACH, RACHMIL		1.2 NAME	LEKACH, RACHMIL	
STREET ADDRESS	46 S.W. FIRST STREET #400		1.3 STREET ADDRESS	5358 SW 34th TERRACE	
CITY-ST-ZIP	MIAMI FL		1.4 CMY-ST-ZIP	How wood & 333/2	Change Addition
TITLE	D	☐ DELETE	2.1 TITLE	D SAPERA	ZS Onlings
NAME	LEKACH, SARITA		2.2 NAME	LERACH, SARITA 5358 SW 34 th Tempace	_
STREET ADDRESS	46 S.W. FIRST STREET #400		2.3 STREET ADDRESS	l =	_
CITY-ST-ZIP	MIAMI FL		2. 4 CiTY-ST-ZiP	Howy wood, Fr 33312	Change Addition
TITLE	\$	DELETE	3 1 TITLE		E radiion
NAME	ESPINOSA, TANIA N	•	3.2 NAME		
STREET ADDRESS	3725 SW 30 AVENUE		3.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE		
NAME			4. 2 NAME		}
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	5.1 TITLE	i	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this sling 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 of 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 acquess with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

☐ Addition