FILED May 16, 2000 8:00 am Secretary of State 05-16-2000 90164 038 ***150.00

,2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000056802

1. Entity Name

MIRAMAR ROCK, INC.

Principal Place	e of Business	Mailing Address							
601 SOUTH BAYSHORE DRIVE NAMI FL 33133-5461		2601 S. BAYSHORE DR. LEGAL DEPT SUITE 900 MIAMI FL 33133-5417							144 (144 1 44)
2. Principal P	ace of Business Federal Highway	3. Malling Address 200 S. Biscayne Boulevard							
		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
Suite, Apt. Suite		Suite 4900				BONO, WHILE WITHOUT ACE			
City & State		City & State			4.	FEI Number 65-068012	<u> </u>		plied For
Boca Ra	aton, FL	Miami, FL			Not Ap		t Applicable		
Zip	Country	Zip Count		iry	5.	Certificate of Status Desired		8.75 Add ee Required	
<u> 33431</u>	6. Name and Address of Current R	33131 L			7. Name and Address of New Registered Agent				
	o. Harrie and Address of Carrone		Name						
GOLDMAN, JOEL K				K. Lawrence Gragg					
2601 SOUTH BAYSHORE DRIVE				Street Address (P.O. Box Number is Not Acceptable)					
SUIT		200 S.			Biscayne Blvd., Suite 4900				
MIAMI FL 33133-5461				City FL Zip Code					e
				M	iami	· · · · · · · · · · · · · · · · · · ·		3313	31
8. The above	named entity submits this statement for	the purpose of changing its	registere	ed office or	registered as	gent, or both, in the State of F	lorida.		
1. KIMADALO SLOCE 4/28/64									
SIGNATURE ,	Signature, type or printed name of registered agent ar		- Begistered	1 Agent signati	ure required when	reinstating)	DATE		
·	Signature, typas or printed harrost registered against								
9. This corpo		FILE NOW!!! FEE IS \$150.00			10. Election Campaign F			May Be	
_	requirement and elects to do so.	After MAY 1, 2000 Fee will be \$55 Make Check Payable to Department				Trust Fund Contributi	on.	Added	to Fees
·	<u></u>	<u> </u>			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
11. TITLE	OFFICERS AND DIRECTORS Delete		TITLE		P/D	<i>551116116</i> , 6711111626 10 0.			x Addition
NAME	JEFFREY, THOMAS W	XIX Duce	NAM		1 '	an Pichard C			x-
STREET ADDRESS	2601 SOUTH BAYSHORE DRIVE		STRE	ET ADDRESS		erman, Richard S. O N. Federal Highway, Suite 105E			
CITY-ST-ZIP			CITY	-ST-ZIP		a Raton, FL 33431			
TITLE	V	XX Delete	TITLE		V	acon, rh juaji		☐ Change	🔀 Addition
NAME	LAGUARDIA, JOHN		NAM	E	Git1i	tlin, Gene			
STREET ADDRESS	2001 GOOTH BATGITOTIC BILLIE			ET ADDRESS		00 N. Federal Highway, Suite 105E			
CITY-ST-ZIP	MIAMI FL 33133-5461		CITY	-ST-ZIP		Raton, FL 3343			
TITLE	VT	XX Delete	TITLE			•		Change	☐ Addition
NAME	FISCHER, JOHN H	AA	NAMI						
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33133-5461			-ST-ZIP	-				
TITLE	P P P P P P P P P P P P P P P P P P P	Delete	TITLE					☐ Change	☐ Addition
NAME STREET ADDRESS	WOODBURY, KIMBALL D 2601 SOUTH BAYSHORE DRIVE	•••	NAMI STRE	ET ADDRESS					Ì
CITY-ST-ZIP	MIAMI FL 33133-5461			-ST-ZIP	ļ				ſ
	VAS	XX Delete	TITLE					Change	· Addition
TITLE NAME	GOLDMAN, JOEL K	ca Delete	NAMI						
STREET ADDRESS	2601 SOUTH BAYSHORE DRIVE			ET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33133-5461			-ST-ZIP	1				_
TITLE	VSD	xX Delete	TITLE					Change	☐ Addition
NAME	GOLDMAN, JOEL K		NAM						
STREET ADDRESS	2601 S RAYSHORE DRIVE		STRE	FT ADDRESS					

3. 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 peport 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 receive for 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 appreciate with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

MIAMI FL 33133

SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard S. Ackerman 4/30/00 561-395-9666

Daytime Phone #

CR2E