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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600063143 (7)

BLUM & PERLMAN, P.A.

Principal Place of Business

Mailing Address

## FILED Apr 18 1997 8:00am Secretary of State



800 SOUTH BISCYNE BOULEVARD SUITE 9150 MIAMI FL 33131		200 SOUTH BISCYNE BOULEVARD SUITE 3150 MIAMI FL 33131-5321						
					3. Date Inco 07/29/19	rporated or Qualified	3a. Date of Las	st Report
	lace of Business	2a. Mailing Address			4. FEI Numb	or or FO		Applied For
21 200 SOUTH BISCAYNE BLYD				0, 65-0	682459		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Certificate	of Status Desired		5 Additional Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees			
Zip 24	Country 25	7ip 29 33 31-23 13	ry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
	9. Name and Address of Current				10. Name and	d Address of New Reg	gistered Agent	
	ILMAN, JONATHAN		8	1 Name				
200 SOUTH BISCYNE BOULEVARD				82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 3150  SUITE 33131				200 SOUTH BISCAYNE BOULEVARD				
MUT	MI 12 93131		L	<u> </u>				
			8	]			FL   ]	?ip Code
office or r	to the provisions of Sections 607.0502 ogistered agent, or both, in the State of	l Horida. Such change was aut	borized b	by the corr	corporation submits to	his statement for the prectors. I hereby accept	urpose of changin	ig its registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agent	and title if an Icable (NOTE: I	son stered A	nost signatura	required when reinstating)		DATE	
12,	OFFICERS AND		13.			CHANGES TO OFFIC		ORS IN 12
TITLE	D	DELETE	1.1 THE		PRESIDENT	& DIRECTOR	Chan	ge Addition
NAME BLUM, W. BARRY			1.2 NAM	.				أ ميا
STREET ADDRESS 200 SOUTH BISCYNE BLVD., SUITE 3150			1.3 STRE	ET ADDRESS	200 SOUTH	BISCAYNE B	LVD1,5017	re 3150
CITY-ST-ZIP	MIAMI FL 33131		1.4 CITY	·\$1 - 7IP				{{}^{2}}
TITLE	DEDIMAN IONATHAN C	DELETE	2.1 TITLE		VICE PRESIDE	NT, TREASURER	t Differ St Chang	ge Addition C
NAME	PERLMAN, JONATHAN E 200 SOUTH BISCYNE BLVD., SUITE 3150			2 NAME 3 STREET ADDRESS 200 SOUTH		automial a	1.10 SILT	c 3(50
MIAM EI 99494					200 SOUTH	BISCHAGE B	LWy SOIT	
CITY - ST - ZIP	Mr. am   1 C 00 10 1	DELETE	2.4 0114	· S1 - 7IP	W. C. 0015 00 17	5//0/20 04 6	Olect - Chan	oo IST Addition
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CITY-ST-ZIP			3.4 CHY	. 91_7IP	MIDAL T	, SCRETARY 8 S , CHER DA BISCAYM L 3313)	,,,	
TITLE		DELETE	4.1 TITLE		<del>                                    </del>	V	☐ Chan	ge Addition
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STREET ADDRESS			4.3 STREE	LADDRESS				1
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				J
-TITLE		DELETE	5.1 1ITLF				Chang	ge 🔲 Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS	•			
CITY-ST-ZIP			5.4 CITY	\$1 - 2(P				
TITLE		[] DELETE	6.1 THLE	ļ			Chang	ge 🔲 Addition
NAME			62 NAME					
STREET ADDRESS			63 STREE	T ADDRESS				
CITY-ST-ZIP	Control of the second		6.4 CHY			7/07/21		
- Mar. LOO Deret	by certify that the information supplied y	vuo mis tunn ones het nuality t	or the ex	ampuan et	iaion in Socion 1190	zusimi Elorida Statutos	- Literinor corlidy h	ant tha

4. To hereby certify that the information supplied with this being does not quality 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 chapter or on an attachment with an address.

SIGNATURE:

< Presiden

W Burry Blum, President 4-15-97 305-377-156

CR2E034 (9/96)