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

**PROFIT CORPORATION** ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000069187 (8)

EASTSIDE PLAZA, INC.

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

14. I hereby certify that the information supplied with this filling does not qualify indicated on this annual report or supplemental annual report is the rind at officer or director of the corporation or the receiver or till stee imported to Block 12 or Block 13 if changed, or on an attachment distant address.

CITY-ST-ZIP

CITY-ST-ZIP

NAME

Dringing Dis	o of Discipano	Mailing Address				
Principal Place of Business Mailing Address  3015 NW 79TH \$TREET 2ND FLOOR 3015 NW 79TH \$TREET 2ND FLOOR				10		
3015 NW 79TH \$TREET 2ND FLOOR 3015 NW 79TH STREET 2 MIAMI FL 33147 MIAMI FL 33147			ZNŲ FLU(	ım		
					DO NOT WRITE IN THIS S	PACE
					3. Date Incorporated or Qualified	
A Oringinal D	Near of Durings	2a. Mailing Address			08/20/1996	<del></del>
<del></del>					4. FEI Number	Applied For
		Suite Ant # etc	Suite, Apt. #, etc.		65-0706678	Not Applicable \$8.75 Additional
22		27	Conto, Apr. M. Oto.		5. Certificate of Status Desired	Fee Regulred
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the curr	ent year Intangible
24	25	29	30			Yes No
	9. Name and Address of Curre	nt Registered Agent		81 Nam	10. Name and Address of New Registered A	igent
	URNER, SHERRY			1	•••	
<del>19501-EAST-CLUB DRIVE #308</del> -AVENTURA FL 83188				82 Stree	oot Address (P.O. Box Number is Not Acceptable)	
				83	5/3 NAV 7/ 37.	
				83		
				84 Sity	INMI FL	85 Zip Code
44 Dureuppt	to the provisions of Sections 607.05	02 and 607 1509 Florida Statut	or the et		ned corporation submits this statement for the purpose of	phanoina its registered
office or r	egistered agent, or both in the Stat	e of Florida. Such change was a	authorized	by the co	corporation's board of directors. Thereby accept the appo	ointment as registered
-	im familiar pair, and adceptant oblit	gations of, Section 607.0505, Fig	onda Stati	nes.	4/2/4	3 <i>x</i>
SIGNATURE	Signature, typed or printed name of registered as	pent and title if applicable (NOT	f : Registered	Agent signat	ature required when reinstating) DATE	70
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	DELETE	1.1 10	LE		Change Addition
NAME	\$TUDNIK, ETTI		1.2 NA	ME		
STREET ADDRESS	154 SOUTH ISLAND		1.3 ST	REET ADDRESS	SS 3015 NW 79 57	
CITY-ST-ZIP	GOLDEN BEACH FL 33160			Y - ST - ZIP	MIAMI, FL 33141	
TITLE	D	☐ DELET <b>e</b>	2.1 TIT		1	Change Addition
NAME	STUDNIK, NEIL		2.2 NA		0.15.11.00.00	
STREET ADDRESS	154-SOUTH ISLAND		1	EET ADDRESS		
CITY-ST-ZIP	GOLDEN BEACH FL 93160	Distre		Y-ST-ZIP	MIAMI, FL 33147	Change   Lader-
TITLE		DELETE	3.1 TIT		1	Change Addition
NAME I			3.2 NA	_	an )	
STREET ADDRESS				REET ADDRESS	55	
CITY-ST-ZIP TITLE		DELETE	3.4. CI	Y-ST-ZIP	<del></del>	Change Addition
NAME		C. Octob	4. 2 N/		`	
STREET ADDRESS				ivie 1661 address	cc	
CITY-ST-ZIP				re i addres: Y-ST-ZIP	, , , , , , , , , , , , , , , , , , ,	
TITLE		DELETE	5 1 TIT			Change Addition
NAME		- · · -	5.2 NA			

5.3 STREET ADDRESS 5.4 CITY - ST- ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

**FILED** May 06 1998 8:00am Secretary of State



the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information trate and that my signature shall have the same legal effect as if made under oath; that I am an xecute this report as required by Chapter 607, Florida Statutes; and that my name appears in

4/25/98

Change

Addition