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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Şandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000069278 (5)

FILED Mar 13 1998 8:00am Secretary of State

	BY THE SEA, INC.	009276 (5)							
Principal Place	of Business	Mailing Address					11 00110 0 1110		DI COLI CONT
200 SOUTH BISCAYNE BOULEVARD 200 SOUTH BISCAYNE BOU			ULEVARD						
SUITE 2120 SUITE 2120 SUITE 2120 MIAMI FL 33131						DO NOT WRITE IN THIS SPACE			
MIAMI FL 33131						3. Date Incorporated or Qualified			
						08/19/1996			
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number		Ap	oplied For
21 Waves	By the Jea		The S	rea_		NOT APPLICABLE		No	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.	11	#2		5. Certificate of Status Desired		\$8.75	
2282685			HWY	100		***************************************		Fee Re	-i
City & State 23 LS Qn	norada, 1-L	City & State 28 75 Comorac		R		6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	May Be to Fees
z _{ip} 3303			Countr	<u>1514</u>	<i>.</i>	8. This corporation owes or has pa Personal Property Tax due June	30.	Yes [angible No
9, Name and Address of Current Registered Agent PARTICLE DATRICLE C 81 Name						10. Name and Address of New Re	gistered A	Lgent	
DANTES, FAIRIUN C									
200 SOUTH BISCAYNE BOULEVARD SUITE 2420 1800					Addre	ess (P.O. Box Number is Not Acceptab	le)		
MIA	MI FL 33131		63	1					
			84	City			FL	85 Zip (Code
11, Pursuant to	o the provisions of Sections 607.0502 egistered agent, or both, in the State of in familiar with, and accept the obligat	and 607, 1508, Florida Statutes If lorida, Such change was autons of Section 607, 6505, Flori	the above	e-named y the corp	corpo	pration submits this statement for the pon's board of directors. I hereby accept	urpose of at the appo	changing it pintment as	s registered registered
SIGNATURE	Tribinia titi, bila accept the singin	(A) 57, 600(6) 1 007.0000, 1 (6)	oa olaloid						
	Signature, typical or profed nation of registered agent			ent signatura	require	d when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS DELETE	13.		rÐa	ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	Addition
NAME	BARTHET, PATRICK C		I lo		10	1 1 12	_	Z KCHANGE	L ROUBION
STREET ADDRESS	200 SOUTH BISCAYNE BLVD.,	SUITE 2120	12 NAME 1.3 STREET ADDRESS		lå.	olds of Hwy #	2		
CITY-ST-ZIP	MIAMI FL 33131	OUTL ETEC			20		3034	0	
TITLE	DELETE		1.4 CITY-ST-ZIP LS		-3	Harrana I e o	<u> </u>	Change	Addition
NAME	- ····		22 NAME					•	-
STREET ADDRESS			2.3 STREET ADDRESS			• •			
CITY-ST-ZIP			2 4 CITY-	ST-ZIP					
TITLE	☐ DELETE		3.1 TITLE				-	Change	☐ Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS					
CITY-ST-ZIP		- I priett	3.4 CITY-	ST-ZIP	ļ				1.1.00
TITLE	DELETE		4.1 TITLE		İ			L Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS				T ADDRESS]				
CITY - ST - ZIP TITLE		DELETE	4.4 CITY -	SI-ZIP	<u> </u>			Change	Addition
NAME			5.2 NAME				·		
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			5.4 CITY-)				
TITLE		DELETE	61 TITLE					Change	Addition
NAME			6.2 NAME		İ				
STREET ADDRESS			6.3 STREE	1 ADDRESS					
1 1					ı				

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 claringed, or on an attachingent with an address