## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000082077 (4)

2621 OCEANIA COLLINS, INC.

## FILED Aug 01 1997 8:00am Secretary of State



2/20/92

Principal Place of Business Marling Address 16445 COLLINS AVENUE UNIT #2621 16445 COLLINS AVENUE LINIT #2621 NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 10/01/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 21 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zφ 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SLEWETT, ROBERT D 81 Name 767 ARTHUR GODFREY ROAD 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33140 83 City 64 Zip Code 11. Pursuant to the provisions of Sections 607,0502 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 obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. (4/97 ħ DELETE TITLE 1.1 THLE Change Addition STEINBERG, PAUL B NAME 1.2 NAME 767 ARTHUR GODFREY ROAD STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33140 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CHY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 DH F NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-S1-ZIP CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP Who does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the value and accurate and that my signature shall have the same legal effect as if made under oath; that error trusted emphasized in execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the information supplied with thi information indicated on this annual report. I am an officer or director of the corporation appears in Block 12 or Block 13 if changes

er or trustee empowered achment with an address