

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

FILED

May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000098669 (0)**

1. Corporation Name

FAMILY VENTURES OF MIAMI, INC.

Principal Place of Business

**200 SOUTH BISCAYNE BLVD.
STE. 2410
MIAMI FL 33131
US**

Mailing Address

**200 SOUTH BISCAYNE BLVD.
STE. 2410
MIAMI FL 33131
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 420 Lincoln Road		26 420 Lincoln Road		12/06/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 Suite 432		27 Suite 432		65-0715637	
City & State		City & State		Applied For	
23 Miami Beach, FL		28 Miami Beach, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 33139		29 33139		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Country		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No	
25 U.S.A.		30 U.S.A.			

9. Name and Address of Current Registered Agent

**PLC INVESTMENTS INC
200 S. BISCAYNE BLVD.
STE. 2410
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name	PLC Investments, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)	420 Lincoln Road
83	Suite 432
84 City	Miami Beach, FL
85 Zip Code	33139

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

Hilda C. Montero, Secretary

4/28/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	President, Director, Treasurer
NAME	CEJAS, PAUL L	1.2 NAME	Pablo L. Cejas
STREET ADDRESS	200 S BISCAYNE BLVD. STE 2410	1.3 STREET ADDRESS	420 Lincoln Road, Suite 432
CITY-ST-ZIP	MIAMI FL 33131	1.4 CITY-ST-ZIP	Miami Beach, Florida 33139
TITLE	S	2.1 TITLE	Secretary, Director
NAME	MONTERO, HILDA	2.2 NAME	Hilda C. Montero
STREET ADDRESS	200 S BISCAYNE BLVD. STE 2410	2.3 STREET ADDRESS	420 Lincoln Road, Suite 432
CITY-ST-ZIP	MIAMI FL 33131	2.4 CITY-ST-ZIP	Miami Beach, Florida 33139
TITLE		3.1 TITLE	Director
NAME		3.2 NAME	Julie L. Neitzel
STREET ADDRESS		3.3 STREET ADDRESS	420 Lincoln Road, Suite 432
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Miami Beach, Florida 33139
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 changed, or on an attachment with an address. **Cejas Family Ltd. By Family Ventures of Miami, Inc. Its**

SIGNATURE:

Hilda C. Montero

Hilda C. Montero

4/28/98

205-531-5220

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

0196751

CR2E034 (10/97)