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 # P9700003612 (3)

BUICKS AT BRISTOL, INC.

FILED Apr 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						i ramisadi isa insii sansi nasii nasii nasii adiis	DERED WHO DINOL II	I DI TO FEET A SET
17902 S.W. 77 COURT 17902 S.W. 77 COURT								
MIAMI FL 33157 MIAMI FL 33157						DO NOT WRITE IN THIS SPACE		
					2 0	ate Incorporated or Qualified	IIS SPACE	
					I	•		
2. Principal F	Place of Business	2a. Mailing Address		·	4. FI	01/08/1997 FLNumber - 0		
21 26					l h	5-0737SSZ	- - -	opplied For lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								Additional
22 27					5. C	ertificate of Status Desired		Required
City & State City & State					6. EI	lection Campaign Financing) May Be
28 28					I .	rust Fund Contribution		to Fees
	-			ntry	8. This corporation owes or has paid the current year Intangible			
24	25	29	30			ersonal Property Tax due June 30.		□ No
	9. Name and Address of Curr	ent Registered Agent				ame and Address of New Register	ed Agent	
DONNELLAN, J J III 1900 BRICKELL AVENUE				81 Name				
				82 Street	Address (P.O	dress (P.O. Box Number is Not Acceptable)		
ML	AMI FL 33129							
				B3				
				84 City			85 Zip	Code
44		00 1007 4500 51 11 0					L	
office or r	to t ne provisions of Sections 607.09 registered agent, or both, in the Sta	502 and 607.1508, Florida Sta t te of Florida. Such change was	utes, the at authorized	ove-named I by the cor	l corporation s poration's boa	submits this statement for the purpose and of directors. I hereby accept the a	e of changing i	its registered
agent. Fa	am f am iliar with, and accept the obt	gations of, Section 607.0505, f	lorida Stat	ites.	,	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SIGNATURE	Signature, typied or printed name of registriced a	1000 000 000 000 000 000						
12,		ND DIRLCTORS	13.	Agent signature	required whon rein	DATE DITIONS/CHANGES TO OFFICERS A		ES INI 12
TITLE	PSTD	DELETE	1.1 10	LF	T	DITIONAL TO CIT ICENS P	Change	Addition
NAME	HAAS, JAMES R		1.2 NA					3
STREET ADDRESS	17902 S.W. 77 COURT			REET ADDRESS				{
CITY-ST-ZIP	MIAMI FL 33157			Y-\$T-ZIP	j			
TITLE		DELETE	21 11				Change	Addition
NAME			22 NA	MF			– •	
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				Y-S1-ZIP				
TITLE		DELETE	3.1 117		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME			3.2 NA	Mξ				
STREET ADDRESS			3.3 ST	REET ADDRESS				
CITY-ST-ZIP				Y-S1-ZIP				
TITLE		DELETE	4.1 TIT				Change	Addition
NAME			4. 2 N/	ME			•	
STREET ADDRESS			4.3 ST	EET ADDRESS				
CITY-ST-ZIP			4.4 CH	Y-ST-ZIP				
TITLE		☐ DELETE	5.1 TIT				Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	EET ADDRESS				j
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		DELETE	6.1 T∤T			1.5	Change	Addition
NAME			6.2 NA	AΕ				
STREET ADDRESS			6.3 \$16	EET ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP				1

14. Thereby 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.

CICMATURE.

3-11-98