

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90027 032 ***150.00

DOCUMENT # P97000004978

1. Entity Name

666 BISCAYNE BOULEVARD, INC.



Principal Place of Business

420 LINCOLN RD
MIAMI BEACH FL 33139
US

Mailing Address

P.O. BOX 191768
MIAMI BEACH FL 33139
US

2. Principal Place of Business

420 Lincoln Road

3. Mailing Address

P. O. Box 191679

Suite, Apt. #, etc.

Suite 2D

Suite, Apt. #, etc.

City & State

Miami Beach

City & State

Miami, Florida33

Zip

33139

Country

Dade

Zip

33119-1679

Country

Dade

4. FEI Number

65-0721880

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PLC INVESTMENTS, INC
420 LINCOLN RD
MIAMI BEACH FL 33139

Name

Street Address (P.O. Box Number is Not Acceptable)

420 Lincoln Road, Suite 2D

City

Miami Beach

FL

Zip Code
33139

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SD ☐ Delete
NAME MONTERO, HILDA
STREET ADDRESS 420 LINCOLN PENTHOUSE
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 420 Lincoln Road, Suite 2D
CITY-ST-ZIP Miami Beach, FL33139

TITLE PD ☐ Delete
NAME CEJAS, PAUL L
STREET ADDRESS 420 LINCOLN RD PENTHOUSE
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 420 Lincoln Road, Suite 2D
CITY-ST-ZIP Miami Beach, FL33139

TITLE D ☐ Delete
NAME CEJAS, GERTIE
STREET ADDRESS 420 LINCOLN RD STE 443
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 420 Lincoln Road, Suite 2D
CITY-ST-ZIP Miami Beach, FL 33139

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Hilda C. Montero, Secretary

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04 305-531-5220
Date Daytime Phone #