

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90275 018 ***158.75

DOCUMENT # P97000041399

1. Entity Name

A.N.I.-TERRAZAS, INC.

Principal Place of Business

2665 S. BAYSHORE DRIVE
SUITE 202
COCONUT GROVE FL 33133

Mailing Address

2665 S. BAYSHORE DRIVE
SUITE 202
COCONUT GROVE FL 33133

00037533



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9400 S. Dadeland Blvd

Suite, Apt. #, etc.
Suite 100

City & State
Miami, FL

Zip
33156

Country
USA

3. Mailing Address

9400 S. Dadeland Blvd

Suite, Apt. #, etc.
Suite 100

City & State
Miami, FL

Zip
33156

Country
USA

4. FEI Number 65-0751647

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEUTCH, RICHARD E JR
2665 S. BAYSHORE DR. SUITE 202
COCONUT GROVE FL 33133

7. Name and Address of New Registered Agent

Name
Richard C. Deutch, Jr.

Street Address (P.O. Box Number is Not Acceptable)
1 SE 3rd Ave

Suite 3050

City
Miami

FL

Zip Code
33131

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.

SIGNATURE RICHARD E. DEUTCH, JR.

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

(NOTE: Registered Agent signature required when reinstating)

4.12.01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WOHL, MICHAEL
2665 S. BAYSHORE DR. #202
COCONUT GROVE FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WOLFSON, LOUIS III
2665 S. BAYSHORE DR. #202
COCONUT GROVE FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ANGULO, VICTOR
2665 S. BAYSHORE DR. SUITE 202
COCONUT GROVE FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
9400 S. Dadeland Blvd, #100
Miami, FL 33156

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
9400 S. Dadeland Blvd, #100
Miami, FL 33156

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
6001 SW 116 Street
Miami, Florida 33156

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael D. Wohl 4/11/01

Date

(305)854-7100

Daytime Phone #

019240

CR2E034 (10/00)