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PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000054531

W/B TRI-CITY SHOPPING CORP.

TERREPORT TO THE PROPERTY OF T and the same and t Principal Place of Business Mailing Address 2665 S. BAYSHOPE DRIVE 2665 S. BAYSHORE DRIVE SUITE 1002 **SUITE 1002** DO NOT WRITE IN THIS SPACE MIAMI FL 33133 MIAMI FL 33133 3. Date Incorporated or Qualified 6/20/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0767167 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Žip Country Zip Country This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. ☐ Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WEISER, WARREN P 2665 S. BAYSHORE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1002** 83 **MIAMI FL 33133** 64 City 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. MCCU P. WEISER

re, typed or printed name of registered agent and title if applicable Meren **SIGNATURE** of when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition WEISER, WARREN P NAME 1.2 NAME STREET ADDRESS 2665 S. BAYSHORE DRIVE, SUITE 1002 1.3 STREET ADDRESS CITY ST-7IP MIAMI FL 33133 1.4 CITY-ST-ZIP DELETE TITLE Change 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIF 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE □ DELETE 4.1 TITLE Change ☐ Addition NAME 4.2 NAME

6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling 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 chapged, or or an attackness with a addings. Block 12 or Block 13 if changed, or of an attachme

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

500000249945| -04/24/98--01035--029

***158.00

___ Addition

Addition

Change

FILED

Apr 24 1998 8:00am

Secretary of State