1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000086242

1. Corporation Name

May 05, 1999 8:00 am Secretary of State

05-05-1999 90010 029 ***150.00

| OCEAN | BREEZE INTERNATIONAL | L, INC. | | | | | <u> </u> | 12 0 2) 010)0 12 0 2 2 |
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| Principal Plac | e of Business | Mailing Address | | | | | i isin sind | (1 0 1) (1010 (1011) |
| 1 | | | | | | | | |
| MIAMI FL 3313 | KEY DRIVE SUITE 805 | 601 BRICKELL KEY DRIVI MIAMI FL 33131 | E SUITE BUX | 0 | | | | |
| | , | | | | | DO NOT WRITE IN THE | S SPACE | |
| | | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | | 10/07/1997 | | |
| · | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | <u> </u> | Applied For |
| 21 | | 26 | | | | 65-0799232 | | Not Applica |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certifcate of Status Desired | | 5 Additional e Required |
| 22 | | City & State | | | | | | |
| City & Stat | , * | | | | | 6. Election Campaign Financing Trust Fund Contribution | | 00 May Be led to Fees |
| Zip | Country | 28 Zip | Coun | ntrv | | | | eu 10 Fees |
| 24 | 25 | 29 | 30 | iii y | | This corporation owes the current year in Personal Property Tax. | ntangible Yes | □No |
| Z4[| 9. Name and Address of Cur | | 1301 | | | 10. Name and Address of New Registerer | | |
| · · · · · · · · · · · · · · · · · · · | | | | 81 | Name | 10. | | |
| ALLI | | Ļ | _{{}_ | | | | | |
| 601 BRICKELL KEY DRIVE SUITE 805 | | | | 82 Street Ad | | ess (P.O. Box Number is Not Acceptable) | | |
| MIAI | MI·FL 33131 | | ŀ | 83 | | | | |
| | • | | | | | | | |
| | | | | 84 | City | F! | 85 | Zip Code |
| SIGNATURE | Signature, typed or printed name of registered of OFFICERS | agent and title if applicable. (NOT AND DIRECTORS | E: Registered A | Agent si | ignature required | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A | ND DIRE | CTORS IN 12 |
| TITLE | PS | ☐ DELETE | 1.1 TITL | LE | | | ☐ Char | |
| NAME | GALEGO, NORA | | 1.2 NAM | ME |) | | | |
| STREET ADDRESS | 601 BRICKELL KEY DR. STE | 805 | 1.3 STR | REETAL | DORESS | | | |
| CJTY-ST-ZIP | MIAMI FL 33131 | | 1.4 CITS | Y-ST-Z | ύP | | | |
| TITLE | SS | | | | | | | |
| NAME | ALLEN, ROBERT N JR | ☐ DELETE | 2.1 TITL | | | | Char | nge [] Add |
| STREET ADDRESS | | [] DELETE | 2.1 TITL 2.2 NAM | LE | | | ☐ Char | nge [] Add |
| CITY-ST-ZIP | 601 Brickell Key Dr, Ste | _ | 2.2 NAM | LE ME | DORESS | | Char | nge 🔲 Add |
| | 601 BRICKELL KEY DR, STE MIAMI FL 33131 | _ | 2.2 NAM | LE ME REET AL | 1 | | | |
| TITLE | 1 | _ | 2.2 NAM 2.3 STR | LE ME REET AL | 1 | | ☐ Char | |
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| | 1 | E 805 | 2.2 NAM 2.3 STR 2.4 C/T 3.1 TITL | LE ME REET AL TY-ST-2 LE ME | ZIP | | | |
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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 section 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 attachagent with an address, with all other like empowered.

SIGNATURE:

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR