2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 07, 2005 08:00 AM Secretary of State DOCUMENT # P99000100342 1. Entity Name OCEANMAR APARTMENTS, INC. Principal Place of Business Mailing Address 4855 PINETREE DR MIAMI BEACH FL 33140 4855 PINETREE DR MIAMI BEACH FL 33140 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Surte, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 65-0960898 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAPARROS, MARTIN Street Address (P.O. Box Number is Not Acceptable) 4855 PINETREE DR MIAMI BEACH FL 33140 Zip Code City FL 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 agents SIGNATURE Signature, typed or printed no o of registered egent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PTD THE ☐ Change ☐ Addition ☐ Delete NAME CAPARROS, MARTIN STREET ADDRESS 4855 PINETREE DR STREET ADDRESS MIAMI BEACH FL 33140 CITY-ST-ZIP CITY-ST-ZIP SVD 1/000000291629 ☐ Change IIILE Delete m Addition CAPARROS, MARTIN (4/07/05-80029-020 15**0.0**0 NAME NAM STREET ADDRESS 4855 PINETREE DR STREET ADDRESS MIAMI BEACH FL 33140 CHY-ST-ZP CHTY-ST-ZIE Delete Change M Addition DUE 111118 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHTY-ST-ZIP Change ☐ Addition HILL Delete NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP OTY-ST-7P ☐ Delete ☐ Change ☐ Addition TITLE NAME CURRET ADDRESS STREET ADDRESS CH /- S1-762 CHY-ST-ZP ☐ Change Addition HILL ☐ Delete THE NAME MARAE STREET ADDRESS CIPLET ADDRESS CITY-51-78 CITY, ST. 7/P

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 eath; 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

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED