FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT: CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90106 034 ***150.00

1. Corporation	MEN # S56536	3					
i. Corporation	DALE LAND COMPANY, IN						
LAOULN	DALE LAND COM ANT, IN	U •				PIDII AKAN BIBN A	
	•						
Principal Place	e of Business	Mailing Address			- E INDIVIDIO INI DILIP BILBI BIIND BIIBO ALII NIDIL	AFDÚ DIDIL OFOLI D	O C O O O O O O O O
3250 MARY ST		3250 MARY STREET					
SUITE 500 SUITE 500							
MIAMI FL 33133 MIAMI FL 33133				DO NOT WRITE IN THIS	SPACE	,	
US	*	US			3. Date Incorporated or Qualifed		
					05/29/1991 4. FEI Number		lind For
— ·	lace of Business	2a. Mailing Address			···		olied For Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite Ant # etc			65-0289875	\$8.75 A	
22	#, etc.	27			5. Certifcate of Status Desired	Fee Re	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23	_	28			Trust Fund Contribution	Added to	• 1
Zip	Country	Zip	Country	,	8. This corporation owes the current year In	tangible	
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			-
WEISER, SHERWOOD M.			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		-
3250 MARY STREET						-	
STE 500			83				
COCONUT GROVE FL 33133			84	City		85 Zip C	ode
				<u></u>	<u> </u>		
office or r	enistered agent or both in the State	of Florida, Such change was all	thorized by	the corporation	poration submits this statement for the purpose o on's board of directors. I hereby accept the appo	r changing its intment as rec	gistered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flori	da Statutes				
SIGNATURE		Total Sile V and Santia	Pagisternal Agai	et cianature require	ad when reinstating) DATE		\
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	DC DELETE		1.1 TITLE			☐ Change	Addition
NAME	WEISER, SHERWOOD M.		1.2 NAME				
STREET ADDRESS			1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP				
TITLE	DPAS					Change	☐ Addition
NAME			2.2 NAME				
STREET ADDRESS	3250 MARY ST., S-500		2.3 STREET ADDRESS)
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP				
TITLE	VAS DELETE		3.1 TITLE			Change	☐ Addition
NAME	HEWITT, THOMAS F.		3.2 NAME				
STREET ADDRESS	3250 MARY ST., S-500		3.3 STREE	TADDRESS			
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP				
TITLE	VAS	☐ DELETE 41				Change	☐ Addition
NAME	SIBLEY, PETER L.						ļ
STREET ADDRESS	3250 MARY ST., S-500		4.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP			Change	Addition
TITLE	-		5.1 TITLE			□ ∪nange	
NAME	TEMLING, W. PETER		5.2 NAME	T ADODESS			
STREET ADDRESS	3250 MARY ST., S-500			T ADDRESS			
CITY-ST-ZIP	INDUSTRICT TO THE PROPERTY OF		5.4 CITY-ST-ZIP 6.1 TITLE			☐ Change	Addition
TITLE		Li DELETE	6.2 NAME				
NAME				TADODECC			
STREET ADDRESS	\		0.5 STREE	TADORESS			ŀ

CITY-ST-ZIP

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 receiver or trystee 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 attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME