

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

FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # S71116 (5)  
1. Corporation Name  
MIAMI BEACH OCEANFRONT PROPERTIES, INC.



Principal Place of Business 601 BRICKELL KEY DRIVE SUITE 805 MIAMI FL 33131	Mailing Address 601 BRICKELL KEY DRIVE SUITE 805 MIAMI FL 33131
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 601 BRICKELL KEY DR. Suite, Apt. #, etc. 22 705 City & State 23 MIAMI, FL Zip 24 33131		2a. Mailing Address 26 601 BRICKELL KEY DR. Suite, Apt. #, etc. 27 705 City & State 28 MIAMI, FL Zip 29 33131		3. Date Incorporated or Qualified 08/06/1991	
		4. FEI Number 65-0278225		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent ALLEN & GALEGO 601 BRICKELL KEY DRIVE SUITE 805 MIAMI FL 33131				10. Name and Address of New Registered Agent 81 Name 82 DE LA PENA, VILANUEVA & BATAJAN 83 601 BRICKELL KEY DR. ST 705 84 City MIAMI 85 FL 86 Zip Code 33131			
--	--	--	--	--	--	--	--

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.

SIGNATURE  RICARDO BATAJAN, GEN'L MGR 4/29/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASTILLO, ADDY			1.2 NAME			
STREET ADDRESS	7255 NO. OAKMONT DRIVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33015			1.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GOMEZ, LORENA			2.2 NAME			
STREET ADDRESS	7255 NO. OAKMONT DRIVE			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33015			2.4 CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		3.1 TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ALLEN, ROBERT N			3.2 NAME	RICARDO BATAJAN		
STREET ADDRESS	601 BRICKELL KEY DRIVE			3.3 STREET ADDRESS	601 BRICKELL KEY DR. ST 705		
CITY-ST-ZIP	MIAMI FL 33131			3.4 CITY-ST-ZIP	MIAMI, FL 33131		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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 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 on an attachment with an address.

CR2E034 (10/97)