2000 UNIFORM BUSINESS REPORT (UBR) FILED May 04, 2000 8:00 am Secretary of State **DOCUMENT # \$71116** MIAMI BEACH OCEANFRONT PROPERTIES, INC. 05-04-2000 90122 014 ***150 00 Mailing Address Principal Place of Business **601 BRICKELL KEY DRIVE** 601 BRICKELL KEY DRIVE PICIORA 705 MIAMI FL 33131 MIAMI FL 33131-2649 US 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0278225 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DE LA PENA & BAJANDAS, LLP. DE LA PENA, VILLANUEVA LLP Street Address (P.O. Box Number is Not Acceptable) 601 BRICKELL KEY DRIVE SUITE 705 SUITE 705 **MIAMI FL 33131** City MIAMI ^{Zig} Crde 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. LEONCIO E. DE LA PENA 04/28/00 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition Delete TITLE NAME CASTILLO, ADDY NAME 5 STREET ADDRESS 7255 NO. OAKMONT DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33015** ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME GOMEZ, LORENA STREET ADDRESS STREET ADDRESS 7255 NO. OAKMONT DRIVE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33015** Addition ☐ Delete TITLE TITLE NAME BAJANDAS, RICARDO NAME STREET ADDRESS STREET ADDRESS 601 BRICKELL KEY DRIVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 ☐ Change ☐ Addition ☐ Delete TITLE T(T) F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change Addition □ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. RICARDO BAJANDAS SIGNATURE: EAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR