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

FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State FILED DIVISION OF CORPORATIONS 1998 98 APR 22 PM 1: 14 DOCUMENT # V20862 (1)SECRETARY OF STATE THE S.O. BEACH CORP. Principal Place of Business Mailing Address 820 OCEAN DRIVE 555 JEFFERSON AVENUE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>03/13/19</u>92 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0326019 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution П 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name ESTEFAN ENTERPRISES, INC. **555 JEFFERSON AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33139 83 B4 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTF Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE **₩** DELETE 1.1 TITLE Change Addition PD NAME ESTEFAN, EMILLO J 1.2 NAME Emilio Estefan, Jr. 6205 BIRD ROAD STREET ADDRESS 1.3 STREET ADDRESS 555 Jefferson Avenue MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP 4iami Beach. FL 33139 X DELETE STD TITLE 2.1 TITLE Change Addition **VPSTD** NAME ESTEFAN, GLORIA M 2.2 NAME Gloria M. Estefan 6205 BIRD ROAD STREET ADDRESS 2.3 STREET ADDRESS 555 Jefferson Avenue MIAMI FL CITY-ST-ZIP 2.4 CITY - ST - ZIP Miami Beach, FL 33139 DELETE TITLE Change X Addition 3.1 TITLE PAJARDO, REBECCA NAME Frank Amadeo 3.2 NAME 6205 BIRD ROAD STREET ADDRESS 3.3 STREET ADDRESS 555 Jefferson Avenue MIAMI FL CITY-ST-ZIP 3.4. CITY - ST-ZIP Miami Beach, FL 33139 DELETE 300002503475-0 TITLE 4.1 TITLE NAME HERNANDEZ, LUIS F 4.2 NAME -04/28/98--01086--005 6205 BIRD ROAD STREET ADDRESS 4.3 STREET ADDRESS \*\*\*2700.00 \*\*\*\*150.00 MIAMI FL CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE TITLE 5.1 TITLE ☐ Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-\$1-ZIP DELETE TITLE 61 TITLE ☐ Chan NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CHTY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes | further certify that the information indicated on this annual 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 convention or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 if charged or on an attaching it with an address