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SIGNATURE:

14. I hereby certify that the information supplied with this filing does not qualindicated on this annual report or supplemental annual report is true are officer or director of the corporation or the receiver or trustee empowed Block 12 or Block 13 if changed, or on an attachment with an address.

FILED May 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (9) SOUTH BEACH GALLERIES, INC. Principal Place of Business Mailing Address 2800 NW 125TH ST 2800 NW 125TH ST NORTH MIAMI FL 33167 NORTH MIAMI FL 33167 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/22/1992 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0365021 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes □ No 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SPAK, SHELLY 2800 NW 125TH ST Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33167 83 84 City 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, typed or printed name of registered agont and life if applicable (NOTF: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. DELETE Change Addition TITLE 1 1 TITLE **\$LAVIS, ELIOT** NAME 1.2 NAME 2800 NW 125TH ST STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE HELMAN, GARY NAME 2.2 NAME 2800 NW 125TH ST STREET ADDRESS 23 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE SPAK, SHELLY NAME 3.2 NAME 2800 NW 125TH ST STREET ADDRESS 3.3 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 3.4. CITY - \$1 - ZIP TITLE DELETE 41 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - ZIP DELETE Change ___ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

4.27.98

the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information urate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

(305)688-6800