

corp-32

NP # 739698

COSTA BELLA ASSOCIATION, INC.

New Corporation Reincorporation Amendment (\$817.02)

Filed: 7/20/77

By: _____

700307188227

[Handwritten signature]

739698

101-4



Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

July 20, 1977

F. R. RITTER, Director
Division of Corporations
904/488-3140

DAVID C. MACNAMARA
ASSISTANT SECRETARY OF STATE

BRUCE A. SMATHERS
SECRETARY OF STATE

John L. Gornall, Jr., Esq.
Suite 200, Peachtree & Broad Bldg.
Atlanta, Georgia 30303

SUBJECT: COSTA BELLA ASSOCIATION, INC.

DOCUMENT NUMBER: 739698

This will acknowledge receipt of the following:

1. Check(s) totalling \$ 38.00
2. Articles of Incorporation filed July 20, 1977
3. _____ Amendments to Articles of Incorporation filed
4. _____ Articles of Merger or Consolidation filed
5. _____ Certificate of Withdrawal filed
6. _____ Limited Partnership filed
7. _____ Limited Partnership Annual Report filed
8. _____ Trademark Application filed
9. _____ Application for qualification filed _____ . It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for \$5.
10. _____ Reinstatement filed
11. _____ Articles of Dissolution filed
12. _____ OTHER:

ENCLOSED:

1. Certified Copy(ies)
2. Certificate(s) Under Seal
3. _____ Photocopy(ies)
4. _____ OTHER:

Copy 100
7/1/77

186-7

ADMITTED
LAW OFFICES

COFER, BEAUCHAMP & HAWES

SUITE 200, PEACHTREE & BROAD BUILDING

ATLANTA, GEORGIA 30303

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA
June 16, 1977

TELEPHONE
104/577-0200
TELEX:
54 257C
CABLE:
COLBAR-ATL

CARL H. COFER
ROBERT S. BEAUCHAMP
PEYTON S. HAWES, JR.
HARR J. LEVICK
RANDALL B. SCOGGINS
ROBERT F. GOODMAN, JR.
JAMES M. ROLLINS
JOHN L. GORNALL, JR.
LUTHER C. CURTIS
ROBERT S. JONES
KENNETH H. WEISS
J. BOYO PAGE
WILLIAM L. BOST, JR.
J. LINDSAY STRADLEY, JR.
DONALD A. BAKER
CHARLES H. IVY
TIMOTHY J. SWEENEY
P. MICHAEL IYICH III
THOMAS H. RIES
HARRIS R. ANTHONY

739698

739698-77-2 97200****3.00
739698-77-2 97100****5.00
739698-77-2 97000****27.00

Secretary of State
Corporations Division
State of Florida
The Capitol
Tallahassee, Florida 32304

Re: Articles of Incorporation of Costa Bella Association, Inc.

Dear Sir:

AM

Please find enclosed herewith two executed copies of the Articles of Incorporation of Costa Bella Association, Inc., intended to be a not for profit corporation. Also enclosed is a check payable to you in the amount of \$35.00. Please file one of the enclosed executed copies so that the corporate existence of Costa Bella Association, Inc. may begin. Also, please use the other executed copy to furnish the undersigned a certified copy of these Articles of Incorporation.

Thank you for your assistance.

Sincerely,

John L. Gornall, Jr.
John L. Gornall, Jr. *JLG*

JLG:jm
cc: Mr. Eduardo R. De Arellano
Mr. Dalbert W. Jones

598057

PRIVILEGE TAX	
C. TAX	
FILING	27
C. COPY	3
R. A. FEE	3
P. COPY	
SEARCH	
TOTAL	33
BALANCE DUE	3

RECEIVED
JUN 25 10 51 AM 1977
DEPARTMENT OF STATE
TALLAHASSEE, FLA.

FF 30

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LAW OFFICES
COFER, BEAUCHAMP & HAWES
 SUITE 200, PEACHTREE & BROAD BUILDING
 ATLANTA, GEORGIA 30303

CARL H. COFER
 ROBERT S. BEAUCHAMP
 PEYTON S. HAWES, JR.
 MARK J. LEWICK
 RANDALL B. SCOGGINS
 ROBERT F. GOODMAN, JR.
 JAMES H. POLLINS
 JOHN L. BRNALL, JR.
 LUTHER C. CURTIS
 ROBERT S. JONES
 KENNETH M. WEISS
 J. BOYD PAGE
 WILLIAM L. BOST, JR.
 J. LINDSAY STRADLEY, JR.
 DONALD A. BACER
 CHARLES M. IVY
 TIMOTHY J. SWEENEY
 P. MICHAEL LYNCH III
 THOMAS H. RIES
 HARRIS R. ANTHONY

TELEPHONE:
 404/577-8200
 TELEX:
 54 3328
 CABLE:
 COBEAW-ATL

JUL 18 1977
 FLORIDA STATE
 CORPORATIONS DIVISION
 TALLAHASSEE, FLORIDA

June 28, 1977

Office of the Secretary of State
 State of Florida
 Division of Corporations
 Charter Section
 The Capitol
 Tallahassee, Florida 32304

RM 18-77-2 13000 ****3.00

Re: Costa Bella Association, Inc. and your letter of
 June 23, 1977 to John L. Gornall, Jr.

Dear Sir or Madam:

Enclosed is a check payable to the Secretary of State in the amount of \$3.00 to cover the balance due in connection with the above-referenced matter. Please note that the enclosed Articles of Incorporation of Costa Bella Association, Inc. have been drafted in accordance with the letter referenced above.

Upon your filing of the Articles of Incorporation, please return a certified copy of one of the two enclosed executed originals to the undersigned.

Thank you for your assistance.

Sincerely,

J. Lindsay Stradley, Jr.
 J. Lindsay Stradley, Jr.

JLS:jm
 Enclosures

PRIVILEGE TAX	
C. TAX	
FILING	3
C. COPY	
R. A. FEE	
P. COPY	
SEARCH	
TOTAL	3
BALANCE DUE	

RECEIVED
 JUL 18 9 20 AM 1977
 CORPORATION OF STATE
 MAIL ROOM
 TALLAHASSEE, FLA.

A-987



Bruce A. Smithee
SECRETARY OF STATE

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

June 23, 1977

APPROVED
AND
FILED
JUN 20 1977

FLORIDA
CORPORATION
TALLAHASSEE

Mr. John L. Gornal Jr.
Cofor, Beauchamp & Hawes
Suite 200 Peachtree & Broad Building
Atlanta, Georgia 30303

Division of Corporations
Charter Section
204/483-2675

SUBJECT: COSTA BELLA ASSOCIATION, INC.

Returned ; Pending _____; Check acknowledged \$35.00

1. _____ NAME IS NOT AVAILABLE.
2. _____ Name must include a corporate suffix, INC. or INCORPORATED.
3. BALANCE DUE. \$3.00
4. _____ The number of directors the corporation shall have (no less than three) must be shown with a statement designating the total number.
5. _____ The articles state that there will be _____ directors (initially) However, _____ are listed.
6. _____ The qualifications for membership must be shown in the articles of incorporation.
7. _____ The articles of incorporation must state who will manage the affairs of the corporation.
8. _____ Please list the officers and the office(s) held by each.
9. A designation of registered office and registered agent at the same address must be contained within the articles of incorporation, and the registered agent must sign accepting that designation.
10. _____ All incorporators must sign and their signatures must be acknowledged.
11. _____ All incorporators signing must be listed in Article _____.
12. _____ Notary public's acknowledgment is incomplete.
13. _____ Incorporators cannot notarize their own signatures.
14. _____ The document(s) must be legible for microfilm.
15. _____ You must list at least three (3) directors and three (3) incorporators.
16. The articles must state by whom the by-laws may be made, altered, or rescinded. Please be more specific.
17. _____ The articles must state by whom and in what manner amendments to the articles of incorporation may be made.
18. _____

A-987

FILED
JUN 20 8 21 AM 1977
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
COSTA BELLA ASSOCIATION, INC.

By these Articles, the undersigned hereby associate themselves for the purpose of forming a corporation not for profit under Chapter 617, Florida Statutes, and certify as follows:

ARTICLE I.

Name and Definitions

The name of the corporation shall be COSTA BELLA ASSOCIATION, INC. For convenience, the corporation shall be referred to in this instrument as the "Association", and the terms used herein shall have the meaning for each stated in the Condominium Act and the Declaration of Condominium of Costa Bella Condominium (herein referred to as the "Declaration of Condominium"), as said condominium is described below, unless the context otherwise requires.

ARTICLE II.

Purpose

A. The purpose for which the Association is organized is to provide an entity pursuant to Section 718.111 of the Condominium Act, Chapter 718, Florida Statutes, for the operation of Costa Bella Condominium, to be located on the following property in Dade County, Florida:

All those pieces, parcels or tracts of land, situate in the County of Dade and State of Florida, described as follows:

All of Lots 36, 37, 38, 39, 40, 41 and the East 16 feet of Lot 42, all of Lots 50, 51, 52, 53, 54, 55, 56, 57, and Out-Lots 55, 56 and 57, Block 2, and Alleyways, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida.

LESS

All that portion of Out-Lot 55, Block 2, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, as recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida, which lies northwesterly of a line which is concentric with and 60 feet southeasterly (as measured along extended radial lines to the curve) of the southeasterly boundary line of Lots 55 and 56, Block 2, AMENDED PLAT OF POINT VIEW.

LESS

All that portion of Out-Lot 56, Block 2, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, as recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida, which lies northwesterly of a line which is concentric with and 60 feet southeasterly (as measured along extended radial lines to the curve) of the southeasterly boundary line of Lots 56 and 57, Block 2, AMENDED PLAT OF POINT VIEW.

LESS

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All that portion of Out-Lot 57, Block 2, AMENDED PLAT OF POINT VIEW, according to the Plat thereof, as recorded in Plat Book 2, Page 93, of the Public Records of Dade County, Florida, which lies northwesterly of a line which is concentric with and 60 feet southeasterly (as measured along extended radial lines to the curve) of the southeasterly boundary line of Lots 57 and 58, Block 2, AMENDED PLAT OF POINT VIEW.

B. The Association shall pay no dividend, and shall distribute no part of its income to its members, Directors or officers. Nevertheless, the Association may pay compensation in a reasonable amount to its members, Directors, and officers for services rendered, and it may confer benefits upon its members in conformity with the purposes of the Association. Upon termination of the Condominium, the Association may make distributions to its members as permitted by law, and no such payment, benefit or distribution shall be deemed to be a dividend or distribution of income.

ARTICLE III.

Powers

The powers of the Association shall include and be governed by the following provisions:

A. The Association shall have all of the common law and statutory powers of a corporation not for profit which are not in conflict with the purposes of the Association, as set forth in Section B of this Article III, and terms of these Articles, the Declaration of Condominium, and the Condominium Act.

B. The purposes of the Association are to manage, operate, maintain, replace and care for the Condominium Property, items of property on the Land which are owned by members, and property owned by a governmental unit and used for the benefit of Unit Owners.

C. In furtherance of the purposes of the Association, as set forth in Section B of this Article III, the Association shall have all of the powers and duties set forth in the Condominium Act, and all of the powers and duties reasonably necessary to operate the Condominium pursuant to the Declaration as presently drafted and as it may be amended from time to time, including but not limited to the following:

1. The irrevocable right to make and collect Assessments against members as Unit Owners to defray the costs, expenses and losses of the Condominium.

2. To use the proceeds of Assessments in the exercise of its powers and duties.

3. To maintain, repair, replace and operate the Condominium Property, which shall include the irrevocable right to access to each Unit from time to time during reasonable hours as may be necessary for such maintenance, repair or replacement of any Common Elements therein or accessible therefrom, or for the making of emergency repairs therein to prevent damage to the Common Elements or to another Unit or Units.

4. To purchase insurance upon the Condominium Property and insurance for the protection of the Association and its members as Unit Owners.

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5. To reconstruct improvements after casualty and to construct further improvements of the Condominium Property.

6. To make and amend reasonable regulations respecting the use of the Condominium Property.

7. To enforce by legal means the provisions of the Condominium Act, the Declaration of Condominium, these Articles, the By-Laws of the Association and the regulations for the use of the property in the Condominium.

8. To contract for the maintenance, management or operation of the Condominium Property and to delegate to such manager all powers and duties of the Association not specifically required by the Declaration of Condominium to have approval of the Board of Directors or the membership of the Association.

9. To employ personnel for reasonable compensation to perform the services required for proper administration and operation of the Association.

10. To pay taxes and assessments which are liens against any part of the Condominium other than individual Units (unless the individual Unit or Units are owned by the Association) and the appurtenances thereto, and to assess the same against the Units subject to liens for such purposes.

11. To pay the cost of all power, water, sewer, trash, garbage and other utility services rendered to the Condominium and not billed to owners of individual Units.

12. To adopt and establish By-Laws for the operation of the Condominium Property.

The powers of the Association shall be subject to and shall be exercised in accordance with the provisions of the Declaration of Condominium.

D. Subject to the restrictions set forth in Section 16 of the Declaration of Condominium, the Association shall have the power to purchase a Unit or Units and to hold, lease, mortgage and convey the same.

ARTICLE IV.

Members

A. The members of the Association shall consist of all of the Unit Owners of record in the Condominium, and after termination of the Condominium shall consist of those who are members at the time of such termination and their successors and assigns.

B. Change of membership in the Association shall be established by recording in the Public Records of Dade County, Florida, a deed or other instrument establishing a record title to a Condominium Parcel and the delivery to the Association of a true copy of such instrument. The new Unit Owner designated by such instrument shall thereupon become a member of the Association and the membership of the prior Unit Owner shall thereby be terminated.

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C. The share of a member in the funds and assets of the Association cannot be assigned, hypothecated or transferred in any manner, except as an appurtenance of his Unit.

D. In connection with membership in the Association, the owner(s) of each Condominium Parcel shall be entitled to one vote per Condominium Parcel owned, except that the Association shall not be entitled to a vote for any Condominium Parcel owned by the Association. The manner of exercising voting rights shall be determined by the By-Laws of the Association.

ARTICLE V.

Directors

A. The affairs of the Association shall be managed by a Board of Directors. The initial Board of Directors designated by the Sponsor shall consist of three Directors. After Unit Owners other than the Sponsor are entitled to elect at least one-third of the Directors, the Board of Directors shall consist of six (6) Directors. After Unit Owners other than the Sponsor are entitled to elect a majority of the Board of Directors, the Board shall consist of nine (9) Directors, of whom five (5) Directors shall be elected by the Unit Owners and four (4) Directors shall be designated by the Sponsor. Upon the resignation of the four (4) Directors designated by the Sponsor, the Board of Directors shall then consist of five (5) Directors. Except as otherwise provided herein or in the By-Laws, each Director shall be either a person designated by the Sponsor or a person entitled to cast a vote in the Association.

B. Directors may be designated or elected and removed and vacancies on the Board of Directors shall be filled as provided in the By-Laws.

C. The names and addresses of the three members of the first Board of Directors, who shall hold office until the election or appointment of their successors, are as follows:

Eduardo R. De Arellano	378 Gulf Road Key Biscayne, Florida 33149
Jorge Echarte, Jr.	2621 N.E. 46th Street Fort Lauderdale, Florida 33313
Juan Valdes-Pages	5950 S.W. 74th Street Miami, Florida 33143

ARTICLE VI.

Officers

The affairs of the Association shall be administered by the officers designated in accordance with the By-Laws. The names and addresses of the officers who shall serve until the election or appointment of their successors are as follows:

Eduardo R. De Arellano, President	378 Gulf Road Key Biscayne, Florida 33149
Jorge Echarte, Jr., Vice President	2621 N.E. 46th Street Fort Lauderdale, Florida 33313
Juan Valdes-Pages, Secretary and Treasurer	5950 S.W. 74th Street Miami, Florida 33143

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ARTICLE VII.

Indemnification and Insurance

Every Director and every officer of the Association shall be indemnified by the Association against all expenses and liabilities, including counsel fees, reasonably incurred by or imposed upon him in connection with any proceeding or any settlement of any proceeding to which he may be a party or in which he may become involved by reason of his being or having been a Director or officer of the Association, whether or not he is a Director or officer at the time such expenses are incurred, except when the Director or officer is adjudged guilty of wilful misfeasance or malfeasance in the performance of his duties; provided, that in the event of settlement, the indemnification shall apply only when the Board of Directors approves such settlement and reimbursement as being in the best interests of the Association. The foregoing right of indemnification shall be in addition to and not exclusive of all other rights to which such Directors or officers may be entitled.

The Board of Directors may, and shall if reasonably available, purchase liability insurance to insure all Directors, officers or agents, past and present against all expenses and liabilities as set forth above. The premiums for such insurance shall be paid by the Association as a part of the Common Expense.

ARTICLE VIII.

By-Laws

The first By-Laws of the Association shall be adopted by the Board of Directors and may be altered, amended or rescinded by the Board of Directors or the members of the Association as provided in the By-Laws.

ARTICLE IX.

Amendments

Amendments to these Articles of Incorporation shall be proposed and adopted in the following manner:

A. Notice of the subject matter of a proposed amendment shall be included in the notice of any meeting at which a proposed amendment is considered.

B. A resolution for the adoption of a proposed amendment may be proposed either by the Board of Directors or by members owning seventy-five (75%) percent or more of the Condominium Parcels. Directors and members not present in person or by proxy at the meeting to consider the amendment may express their approval in writing, provided such approval is delivered to the Secretary prior to such meeting. A resolution adopting a proposed amendment must bear the approval of not less than a majority of the Board of Directors and of members owning not less than seventy-five (75%) percent of the Condominium Parcels.

C. In the alternative, an amendment may be made by an agreement signed and acknowledged by all the record owners of Condominium Parcels in the manner required for the execution of a deed.

D. No amendment shall make any changes in the qualifications for membership nor the voting rights of members, nor any change in

A-987

Section C of Article III, above, without approval in writing by all members and the written consent of all record owners of mortgages upon Units within the Condominium. No amendment that is in conflict with the Condominium Act or the Declaration of Condominium shall be made, or, if made, shall be of any force or effect.

E. A copy of each amendment shall be certified by the Secretary of State, State of Florida, and be recorded in the Public Records of Dade County, Florida.

F. Sections A and B of this Article IX notwithstanding, until such time as Unit Owners other than the Sponsor lawfully elect a majority of the Directors, amendments to these Articles of Incorporation may be adopted at any meeting of the Board of Directors by a majority vote of the Board of Directors.

ARTICLE X.

Term

The term of the Association shall be perpetual.

ARTICLE XI.

Subscribers

The names and addresses of the three subscribers to these Articles of Incorporation are as follows:

Eduardo R. De Arellano	378 Gulf Road Key Biscayne, Florida 33149
Jorge Echarte, Jr.	2621 N.E. 46th Street Fort Lauderdale, Florida 33313
Juan Valdes-Pages	5950 S.W. 74th Street Miami, Florida 33144

ARTICLE XII.

Initial Registered Office and Agent

The street address of the Association and the initial registered office of it is 1450 South Bayshore Drive, Miami, Florida 33131, and the name of the initial registered agent of the Association at said address is Eduardo R. De Arellano.

IN WITNESS WHEREOF, the subscribers have hereunto affixed their signatures this 15th day of July, 1977.

Eduardo R. De Arellano
Eduardo R. De Arellano
Jorge Echarte, Jr.
Jorge Echarte, Jr.
Juan Valdes-Pages
Juan Valdes-Pages

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STATE OF FLORIDA }
 } SS
COUNTY OF DADE }

BEFORE ME, the undersigned authority on this day personally appeared EDUARDO R. DE ARELLANO, JORGE ECHEPTE, JR. and JUAN VALDESPAGES, who, being duly sworn, severally acknowledged the execution of the foregoing Articles of Incorporation of Costa Bella Association, Inc. for the purposes expressed in such Articles.

WITNESS my signature and official seal at Miami, in the State and County last aforesaid, this 15 day of July, 1977.

Marion M. O'Neil

Notary Public, State of Florida
at Large

My Commission expires: _____

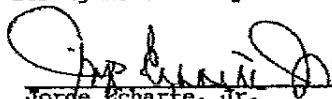
Notary Public, State of Florida at Large
My Commission Expires May 1, 1979
Bonded by American Fire & Casualty Co.

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 48.091, Florida Statutes, the following
is submitted in compliance with said Act:

COSTA BELLA ASSOCIATION, INC., a corporation not for profit,
desiring to organize under the laws of the State of Florida, with
its principal place of business and registered office in the City
of Miami, State of Florida, has named Eduardo R. De Arellano,
located at 1450 South Bayshore Drive, City of Miami, County of
Dade, State of Florida, 33131, as its agent to accept service of
process within Florida.



Jorge Echarte, Jr.
Vice President

Date: July 15 1977

ACKNOWLEDGMENT:

Having been named to accept service of process for the above-
named corporation at the place designated in this Certificate,
I hereby agree to act in this capacity, and I further agree to
comply with the provisions of all statutes relative to the proper
and complete performance of my duties and the keeping open of said
office.



Eduardo De Arellano

Date: July 15, 1977

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THE FILING FEE FOR THE 1978 ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
**CORPORATION ANNUAL REPORT
1978**



Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE (Form COR 620) 12-1-77

AND
FILED
JUN 30 9 00 AM 1978

FLORIDA DEPT. OF STATE
CORPORATION'S DIVISION
TALLAHASSEE, FLORIDA

1102

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office: 739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.	
		Street Address	
		P.O. Box No.	
		City	
		State	Zip Code

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida	07/20/1977	4. Federal Employer Identification Number (FEIN)	59-1754406	5. Date of Last Report
---	------------	--	------------	------------------------

6. Names and Street Addresses of Each Officer and Director				
Names of Officers and Directors	Title	Director (X)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
DE ARELLANO, EDUARDO	PRES. DIR.	✓	378 GULF ROAD	KEY BISCAYNE FL
ECHARTE, JORGE JR.	V. PRES. DIR.	✓	2621 N.E. 46TH ST.	FT. LAUDERDALE FL
VALDES-PAGES, JUAN	TREAS. SEC.	✓	5950 S.W. 74TH ST.	MIAMI FL
VALDES-PAGES, JUAN	SEC. DIR.	✓	5950 S.W. 74TH ST.	MIAMI FL

7. Registered Agent Information	Name	DE ARELLANO, EDUARDO R.	Street Address (Do NOT Use P.O. Box Number)	1450 S. BAYSHORE DRIVE
	City, State and Zip Code	MIAMI, FLORIDA 33131		
If you wish to change Registered Agent on this form, enter all new information here ▶	Name		Street Address (Do NOT Use P.O. Box Number)	
	City, State and Zip Code			

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Typed Name of Signing Officer	JUAN VALDES-PAGES	Title	TREASURER / SECRETARY	Telephone Number	305-373-3131
Signature	<i>J. Valdes-Pages</i>	Date	FEB 20, 1978		

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.

CORPORATION
ANNUAL REPORT



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

1979

APR 16 11 12 AM '79

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

MC 17 70 2 396*****10.00

THIS REPORT MUST BE ACCOMPANIED BY A \$10

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office: 739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131 If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.	2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient. Street Address P.O. Box No. City State Zip Code
---	---

3. Date Incorporated or Qualified To Do Business in Florida 7/20/1977	4. Federal Employer Identification Number (FEIN) 59-1754406	5. Date of Last Report 1978
--	--	--------------------------------

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
DE ARELLANO, EDUARDO	P/D	378 GULF ROAD	KEY BISCAYNE FL
ECHARTE, JORGE JR.	V/D	2623 N.E. 46TH ST.	FT. LAUDERDALE FL
VALDES PAGES, JUAN	T/D	5950 S.W. 74TH ST.	MIAMI FL
VALDES PAGES, JUAN	S/D	5950 S.W. 74TH ST.	MIAMI FL
Berman, Neil	P/D	1450 S. Bayshore Drive Apt. #514	Miami, Fla.
Kasner, Norman	V/D	1450 S. Bayshore Drive Apt. #814	Miami, Fla.
Higgins, Richard	V/D	1450 S. Bayshore Drive Apt. #1110	Miami, Fla.
Young, Herbert	S/D	1450 S. Bayshore Drive Apt. #1604	Miami, Fla.

7. Registered Agent Information		If you wish to change Registered Agent on this form, enter all new information below.	
Name DE ARELLANO, EDUARDO R.	Name Berman, Neil J.	Street Address (Do NOT Use P.O. Box Number) 1450 S. BAYSHORE DRIVE	Street Address (Do NOT Use P.O. Box Number) 1450 S. Bayshore Drive Apt. 514
City, State and Zip Code MIAMI, FLORIDA 33131	City, State and Zip Code Miami, Fla. 33131		

8. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

Typed Name of Signing Officer Berman, Neil J.	Title President	Telephone Number 374-6205
Signature <i>Neil J. Berman</i>	Date 1/15/79	

(Form DOR 520) Rev. 10/25/78 NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

DO NOT WRITE IN THIS SPACE

FILED

Mar 8 1980

COMM. DIVISION
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.	
739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		Street Address	
		P.O. Box No.	
		City	
		State	
		Zip Code	

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

3. Date incorporated or Qualified To Do Business in Florida 7/20/1977	4. Federal Employer Identification Number (FEIN) 59-1754406	5. Date of Last Report 1979
--	--	--------------------------------

6. Names and Street Addresses of Each Officer and Director			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LAMPHEAR, DENNIS	P/D	1450 S. BAYSHORE DR. #51	MIAMI, FL
XXXXXXXXXX, NEXX			
ALVAREZ, FAUSTA	V/D	1450 S. BAYSHORE DR. #51	MIAMI, FL
XXXXXXXXXX, XXXXX			
PARENTI, MICHAEL	T/D	1450 S. BAYSHORE DR. #51	MIAMI, FL
XXXXXXXXXX, XXXXXXXX			
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #51	MIAMI, FL

7. Registered Agent Information	
Name XXXXXXXXXX, XXXX DENNIS. LAMPHEAR	To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3. <i>H.C.</i>
Street Address (Do NOT Use P.O. Box Number) 1450 S. BAYSHORE DR.	
City, State and Zip Code MIAMI, FLORIDA 33131	

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer Dennis Lamphear	Title President	Telephone Number 373-3100
Signature <i>Dennis Lamphear</i>	Date 3-11-80	

DO NOT WRITE IN THIS SPACE

739698 03-24-80 2 6 301 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

MAY 3 3 11 1981
STATE OF FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

PLEASE STAPLE CHECK TO ANNUAL REPORT

1 Name and Address of Corporation Principal Office. 739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		2 Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient. Street Address _____ P.O. Box No _____ City _____ State _____ Zip Code _____	
--	--	--	--

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

3 Date Incorporated or Qualified To Do Business in Florida 7/20/1977	4 Federal Employer Identification Number (FEIN) 59-1754406	5 Date of Last Report 1980
---	---	-------------------------------

6 Names and Street Addresses of Each Officer and Director			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LAMPHEAR, DENNIS	P/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
ALVAREZ, FAUSTA	V/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
MARGOMANIZ ENRIQUE	T/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
RECAREY MIGUEL		1450 S. BAYSHORE DR. #514	MIAMI, FL.
		PAID	
		DATE _____	
		CHECK NO. _____	
		AMOUNT _____	

7 Registered Agent Information		To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.
Name	BY: COSTA BELLA ASSOC.	
LAMPHEAR, DENNIS		
Street Address (Do NOT Use P.O. Box Number)		
1450 S. BAYSHORE DR.		
City, State and Zip Code		
MIAMI, FLORIDA	33131	

8. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects as if Made Under Oath.

Typed Name of Signing Officer DENNIS LAMPHEAR	Title PRESIDENT	Telephone Number 373-3100
Signature <i>Dennis Lamphear</i>	Date 1-17-81	

DO NOT WRITE IN THIS SPACE
MAY 15 1981

739698 03-03-81 2 1 271 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1982



George F.resto
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
FILED

MAY 24 12 33 PM 1982

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

739698
COSTA BELLA ASSOCIATION, INC.
1450 S. BAYSHORE DRIVE
MIAMI, FLORIDA

33131

If above address is incorrect in any way, enter the correct address in Item 2 and use Zip Code

3 Date Incorporated or Qualified To Do Business in Florida

07/20/1977

4 Federal Employer Identification Number (EIN)

59-1754406

5 Date of Last Report

05/01/1981

6 Names and Street Addresses of Each Officer and Director

Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT use P.O. Box Number)	City and State
LAMPHEAR, DENNIS	P/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
ALVAREZ, FAUSTA	V/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
ARGOMANIZ, ENRIQUE	T/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #514	MIAMI, FL
RECAREY, MIGUEL	D	1450 S. BAYSHORE DR. #514	MIAMI, FL
KOPEL, BERNARD	P/D	1450 S. BAYSHORE DR. #1114	MIAMI, FL
ARGOMANIZ, ENRIQUE	V/D	1450 S. BAYSHORE DR. #502	MIAMI, FL
LAMPHEAR, DENNIS	T/D	1450 S. BAYSHORE DR. #2009	MIAMI, FL
YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR. #1604	MIAMI, FL
RECAREY, MIGUEL	D	1450 S. BAYSHORE DR. #1207	MIAMI, FL

Registered Agent Information

7 Name and Address of Current Registered Agent

LAMPHEAR, DENNIS
LAMPHEAR, DENNIS

1450 S. BAYSHORE DR.

MIAMI, FLORIDA

33131

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, I am designated to, and I hereby accept and agree to, the duties of a registered agent for the corporation and I hereby submit 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 resolution duly adopted by its board of directors on N.A.

SIGNATURE

(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10

See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver, Trustee, Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath

Signature

Herbert Young

Date

APRIL 8, 1982

Typed Name of Signing Officer

HERBERT YOUNG

Title

SECRETARY / DIRECTOR

Telephone Number

358-3443

12111600001

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1983



George F. Sunshine
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
SAC
FILED

APR 14 10 40 AM 1983

Read Notice and Instructions on Other Side Before Making Filing
Filing Fee of \$10 Required - Make Checks Payable To: SECRETARY OF STATE, FLORIDA

1 Name and Address of Corporation or Principal Office

739698
COSTA BELLA ASSOCIATION, INC.
1450 S. BAYSHORE DRIVE
MIAMI, FLORIDA 33131

If above address is incorrect in any way, please file a corrected address in item 2, including Zip Code.

3 Date Incorporated or Qualified To Do Business in Florida

07/20/1977

4 Federal Employer Identification Number

59-1754400

05/24/1982

6 Names and Street Addresses of Each Officer and Director

Name of Officer and Director	Title	Street Address	City	State	Zip
KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL	FL	0000
ARGOMANIZ, ENRIQUE	V/D	1450 S BAYSHORE DR 582	MIAMI, FL	FL	0000
LANPHEAR, DENNIS	T/D	1450 S BAYSHORE DR 2009	MIAMI, FL	FL	0000
RECARREY, MIGUEL	D	1450 S BAYSHORE DR 1207	MIAMI, FL	FL	0000
YOUNG, HERBERT	S/D	1450 S BAYSHORE DR 1604	MIAMI, FL	FL	0000
GALVIS, MIGUEL	D	1450 S. BAYSHORE DR 1510	MIAMI, FL	FL	
RUBIO, MARIO	T	1450 S. BAYSHORE DR. PH1	MIAMI, FL	FL	
ELSASSER, RUTH	A.T/S	1450 S. BAYSHORE DR. 407	MIAMI, FL	FL	

Registered Agent Information

7 Name and Address of Current Registered Agent

LANPHEAR, DENNIS - N
1450 S BAYSHORE DR

NEIL J. BERMAN
~~1450 S Bayshore Dr.~~ Brickell Avenue
MIAMI FLORIDA

9 Pursuant to the provisions of Sections 607.014 and 607.017, Florida Statutes, the undersigned hereby certifies that the information submitted herein is true and correct for the purpose of changing this registered office. It is understood that the filing of this statement does not constitute a representation of the accuracy of the information submitted.

Such change was authorized by resolution duly adopted by the board of directors of the corporation.

SIGNATURE *Neil J. Berman*
(Registered Agent or Acting Agent)

2/15/83

\$3.00 additional fee required for Registered Agent changes.

10

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empaneled by the Court, or the Secretary of the Corporation, and I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect as if Made by the Corporation.

Signature *B. Kopel*

Typed Name of Signing Officer
BERNARD KOPEL

Title
PRESIDENT

Feb 13, 1983

373-3100

OF 870 (11-80)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1984



FLORIDA DEPARTMENT OF STATE
George F. Armstrong
Secretary of State
DIVISION OF CORPORATIONS

FILED

JUN 29 11 32 AM '84

SECRETARY OF STATE

Read Notice and Instructions on Other Side Before Making Entries. L.A. 855.EE. FLORIDA
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office.		2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.	
739698 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131		Street Address P.O. Box No. City State Zip Code	
If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.			

3. Date Incorporated or Qualified To Do Business in Florida	07/20/1977	4. Federal Employer Identification Number (FEIN)	59-1754406	5. Date of Last Report	03/14/1983
---	------------	--	------------	------------------------	------------

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983					
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State		
1 KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL		0
2 YOUNG, HERBERT	S/D	1450 S BAYSHORE DR 1604	MIAMI, FL		0
3 ELSASSER, RUTH	A/T/T/S	1450 S BAYSHORE DR 407	MIAMI, FL		0
4 RUBIO, MARIO	T	1450 S BAYSHORE DR PH1	MIAMI, FL		0
5 SALVIS, MIGUEL	D/V/P	1450 S BAYSHORE DR 1510	MIAMI, FL		0
ELSASSER, RUTH	V/D	1450 S. BAYSHORE DR. 407	MIAMI, FL		
GALVIS, MIGUEL	T/D	1450 S. BAYSHORE DR. 1510	MIAMI, FL		

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
BERMAN, NEIL J 444 BRICKELL AVE MIAMI, FL		Name	
		Street Address (Do NOT Use P.O. Box Number)	
		City, State and Zip Code	

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Signature	<i>B. Kopel</i>	Date	6/23/84
Typed Name of Signing Officer	BERNARD KOPEL	Title	President
		Telephone Number	358-0139

11. Should you desire a certificate of status check the box below and include an additional \$5.00 with your payment.

CERTIFICATE OF STATUS DESIRED

\$5 Additional fee required for certificates

SAG 7.23.84

COR 620 (1-84)

ANNUAL REPORT
1985



Read Notice and Instructions on Other Side Before Making Entry
Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation
COSTA BELLA ASSOCIATION, INC.
 1450 S. BAYSHORE DRIVE
 MIAMI, FLORIDA 33131

3 Date of Incorporation or Date when To Do Business in Florida: **06/29/1984**

4 Name and Street Address of Executive Office: **03/14/1985**

Number	Name of Officer and Directors	Residence	Address	City	State	Zip
1	ELGASSER, RUTH	V/C	1450 S BAYSHORE DR 422	MIAMI	FL	
2	GALVIS, MIGUEL	T/C	1450 S BAYSHORE DR 1520	MIAMI	FL	
3	KOPEL, BERNARD	P/D	1450 S. BAYSHORE DR 1114	MIAMI	FL	33131
4	YOUNG, HERBERT	S/D	1450 S. BAYSHORE DR 1604	MIAMI	FL	33131
5	DORTOL, HENRI G.	T/D	1450 S. BAYSHORE DR 1811	MIAMI	FL	33131
6	DEWITT, ANDREW	D	1450 S. BAYSHORE DR 1011	MIAMI	FL	33131
	GALVIS, MIGUEL	V/D	1450 S. BAYSHORE DR 1510	MIAMI	FL	33131

7 Name and Address of Current Registered Agent
BERMAN, NEIL J
444 BRICKELL AVE
MIAMI, FL

8 Name and Address of New Registered Agent

9 Pursuant to the provisions of Sections 607.034 and 607.037 Florida Statutes, the above named corporation, organization or partnership, the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent or both in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors or its governing body.

I hereby accept the appointment of registered agent I am familiar with and accept the obligations of Sect. 607.031 F.S.

SIGNATURE _____ DATE _____
 (Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10 I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Section 607.034. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer signing must be listed in Block 6)

Signature: *Herbert Young* Date: **MARCH 28, 1985**

Typed Name of Signing Officer: **HERBERT YOUNG** Title: **SECRETARY**

Telephone Number: **(305)-373-3100/358-1443**

11 Should you desire a certificate of status check the box. CERTIFY DATE OF STATUS DESIRED
 \$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1986



FLORIDA DEPARTMENT OF STATE
George F. Sweeney
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable to Secretary of State

1 Name and Address of Corporation Principal Office

739698 9
COSTA BELLA ASSOCIATION, INC.
1450 S. BAYSHORE DRIVE
MIAMI, FLORIDA 33131

2 Enter Change of Address of Corporation Principal Office P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3 Date Incorporated or Qualified To Do Business in Florida

06-29-1984

4 Federal Employer Identification Number (FEIN)

59-1754406

5 Date of Last Report

04/23/1985

6 Names and Street Addresses of Each Officer and Director as of December 31, 1985

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL 33131
YOUNG, HERBERT	S/D	1450 S BAYSHORE DR 1604	MIAMI, FL 33131 0
DORIOL, HENRI G.	T/D	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0
DEWITT, ANDREW	D	1450 S BAYSHORE DR 1011	MIAMI, FL 33131 0
SALVIS, MIGUEL	V/D	1450 S BAYSHORE DR 1510	MIAMI, FL 33131 0
ARGOMANIZ, ENRIQUE	D	1450 S. BAYSHORE DR. 502	MIAMI, FL 33131

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

BERMAN, NEIL J.
444 BRICKELL AVE
MIAMI, FL

8 Name and Address of Next Registered Agent

Name 81
Street Address (Do NOT Use P.O. Box Number) 82
City and State 83 FL Zip Code 84

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ (Registered Agent Accepting Appointment)

DATE _____

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath (Officer signing must be listed in Block 6)

Signature *B. KopeL*

Date 3/17/86

Typed Name of Signing Officer B. KOPEL

Title President

Telephone Number 374-1368

11 Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee Required for Certificate of Status

CR2004 (1/85)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION
ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$75 Required - Make Checks Payable to Secretary of State

1. Name and Address of Corporation Principal Office:

739698
COSTA BELLA ASSOCIATION, INC.
1450 S. BAYSHORE DRIVE
MIAMI, FLORIDA 33131

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida

06/29/1984

4. Federal Employer Identification Number (FEIN)

59-1754406

5. Date of Last Report

03/31/1986

6. Names and Street Addresses of Each Officer and Director as of December 31, 1986

1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
KOPEL, BERNARD	P/D	1450 S BAYSHORE DR 1114	MIAMI, FL 33131	
YOUNG, HERBERT	T/D	1450 S BAYSHORE DR 1604	MIAMI, FL 33131	0
DONIC, HENRI G. LOPARDO, ALEXANDRA	T/D S/D	1450 S BAYSHORE DR 1811	MIAMI, FL 33131	0
CENEF, MORELL BARCELO, GLADYS	D D	1450 S BAYSHORE DR 1011	MIAMI, FL 33131	0
ARMONIZ, ENRIQUE	D	1450 S BAYSHORE DR 502	MIAMI, FL 33131	0

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GERMAN, NEIL J
ATTORNEY AT LAW ONE BISCAYNE TOWER
MIAMI, FL 2 SOUTH BISCAYNE
MIAMI, FL 33131

8. Name and Address of New Registered Agent

Name 81
SAME AGENT (MOVED)
Street Address 1 (Do NOT Use P.O. Box Number) 82
Street Address 2 (Do NOT Use P.O. Box Number) 83
City and State 84 FL. Zip Code 85

9. Pursuant to the provisions of sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors.

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent change

10. I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath (Officer signing must be listed in Block 6)

Signature *B. KopeL* Date 5/21/87
Typed Name of Signing Officer B. KOPEL Title President Telephone Number 373-3100

11. Should you desire a certificate of status check the box.
CERTIFICATE OF STATUS DESIRED \$5 Additional Fee required for a Certificate of Status

CI-6004 (1-77)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jan Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

740698
SHILOH DAY CARE CENTER, INCORPORATED
4327 15TH AVENUE SOUTH
ST. PETERSBURG, FL.

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Above is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date incorporated or Qualified To Do Business in Florida

11/04/1977

4. Federal Employer Identification Number (FEIN)

59-1774448

5. Date of Last Report

11/10/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SYMON, W. S., REV.	P	230 43RD AVE N.	ST. PETERSBURG, FL.
KOLBY, BETTY	S	863 3RD AVE N.	ST. PETERSBURG, FL.
PAYTON, PAULINE	D	231 CENTRAL AVE	ST. PETERSBURG, FL.
BOYDSTON, BRYAN	D	2600 9TH ST. N.	ST. PETERSBURG, FL.
WILLIAMS, CULLIVER	D	6625-32 WAY, S.	ST. PETERSBURG, FL.
TINN, DALE	D	8410 4TH STREET N.	ST. PETERSBURG, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

WASHINGTON, ESTELL
1934-23RD ST., S.
ST. PETERSBURG, FL. 33712

8. Name and Address of Agent

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

Zip Code 85

FL

I, Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.025 F.S.

SIGNATURE

Estell Washington
(Registered Agent Accepting Appointment)

DATE 3/9/88

10. If a foreign corporation, date first transacted business in Florida

11. Sign in appropriate notations under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer or Director Signature Must Be Signed in Block 6)

Signature

Estell Washington
Typed Name of Signing Officer or Director
Estell Washington
Title

Date

3/9/88

Telephone Number

(813) 327-2985

12. Should you desire a certificate of status check this box

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

**CORPORATION
ANNUAL REPORT
1988**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DATE: _____ NAME: _____

Filing Fee of \$25 Required - Make Checks Payable to Secretary of State

1. Name and Address of Corporation Principal Office: 739699 COSTA BELLA ASSOCIATION, INC. 1450 S. BAYSHORE DRIVE MIAMI, FLORIDA 33131	2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient: Street Address 21 P.O. Box No. 22 City and State 23 Zip Code 24
---	--

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified to Do Business in Florida: 06/29/1984	4. Federal Employer Identification Number (FEIN): 59-1754406	5. Date of Last Report: 06/09/1987
--	---	---

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987				
1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
KOPEL, BERNARD	P/D	1450 S. BAYSHORE DR 1114	MIAMI, FL 33131	
YOUNG, HERBERT	T/D	1450 S. BAYSHORE DR 1604	MIAMI, FL 33131	0
LOPARDO, ALEXSANDRA	S/D	1450 S. BAYSHORE DR 1011 1906	MIAMI, FL 33131	0
BARCELO, GLAUVS	S/V/P	1450 S. BAYSHORE DR 1011 1110	MIAMI, FL 33131	0
ARGOVANIZ, ENRIQUE	D. F. ASST. T/S	1450 S. BAYSHORE DR 502	MIAMI, FL 33131	0

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
BERMAN, NEIL J ONE BISCAYNE TOWER 2, SOUTH BISCAYNE 33131		Name 81 Street Address 1 (Do NOT Use P.O. Box Number) 82 Street Address 2 (Do NOT Use P.O. Box Number) 83 City and State 84 FL Zip Code 85	

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of, Section 607.025 F.S.

SIGNATURE: _____ DATE: _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida: _____

11. See separate instructions upon instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer or Director Signature must be filed in Block 6)

Signature: B. KopeL Date: 6/6/88
Typed Name of Signing Officer or Trustee: BERNARD KOPEL Title: PRESIDENT Telephone Number: _____

12. Should you desire a Certificate of Status, check the box: CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION
 ANNUAL REPORT
 1989



FLORIDA DEPARTMENT OF STATE
 Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
 1989 AUG 15 PM 4:13

Read Notice and Instructions on Other Side Before Making Entries
 Filing Fee of \$35 Required - Make Checks Payable to Secretary of State

1. Name and Address of Corporation Principal Office:
 ZIP + 4
 739698 9
 COSTA BELLA ASSOCIATION, INC.
 1450 S. BAYSHORE DRIVE
 MIAMI, FLORIDA 33131-3612

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number, Also if NOT Significant
 08/16/89 00000 023
 Street Address 21
 P.O. Box No. 22
 ANNUAL REPORT
 ANNUAL REPORT 35.0
 City and State 23
 TOTAL 35.0
 Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified to Do Business in Florida: 05/29/1984
 4. Federal Employer Identification Number (FEIN): 59-1754406
 5. Date of Last Report: 08/15/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

1	2	3	4	5
	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
P/D	ROPER, DONALD	1450 S BAYSHORE DR 1114	MIAMI, FL 33131	
V/D	PERE SOPH	1450 S BAYSHORE DR 1906	MIAMI, FL 33131	0
T/D	YOUNG, HERBERT	1450 S BAYSHORE DR 1604	MIAMI, FL 33131	0
S/D	LOPARDO, ALEXANDRA	1450 S BAYSHORE DR 1906	MIAMI, FL 33131	0
P/D	BARCELO, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131	0
A/P/S	ARGOMANIZ, ENRIQUE	1450 S BAYSHORE DR 502	MIAMI, FL 33131	0
S/D	GERARD DOLOL	1450 S BAYSHORE DR 1011	MIAMI, FL 33131	
A/P/S	GISELA WEBBER	1450 S BAYSHORE DR 301	MIAMI, FL 33131	

REGISTERED AGENT INFORMATION

7. Name and Address of Client Registered Agent:
 BERMAN, NEIL J.
 ONE BISCAYNE TOWER
 2 SOUTH BISCAYNE
 MIAMI, FL 33131

8. Name and Address of New Registered Agent:
 Name 81
 Street Address 1 (Do NOT Use P.O. Box Number) 82
 Street Address 2 (Do NOT Use P.O. Box Number) 83
 City and State 84 FL Zip Code 85

9. Pursuant to the provisions of Sections 607.031 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.025 F.S.

SIGNATURE _____ DATE _____
 (Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.
 I Certify That I Am An Officer or Director of the Corporation, the Recorder or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
 I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.
 (Officer or Director signing must be listed in Block 6.)

Signature: Gladys Barcelo Date: 6/29/89
 Typed Name of Signer: Officer or Director: GLADYS BARCELO Title: PRESIDENT Telephone Number: (305) 272-3100

12. Should you desire a certificate of status, check the box OF STATUS DESIRED

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

PS0123440

701

CORPORATION
ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

SECRET - 100000

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required - Make Checks Payable to: Secretary of State

1. Name and Address of Corporation Principal Office.

739698 9

ZIP + 4 PRESORT

COSTA BELLA ASSOCIATION, INC.
1450 S. BAYSHORE DRIVE
MIAMI, FLORIDA 33131-3612

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida 06/29/1984

4. FEI Number 59-1754406

FEI Number Applied For
FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1	2	3	4	5
Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
1x	V/D SOPP, PEER	1450 S BAYSHORE DR 1900	MIAMI, FL 33131	
2	T/D YOUNG, HERBERT	1450 S BAYSHORE DR 1604	MIAMI, FL 33131 0	
2x	P/D BARCELO, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131 0	
3x	S/D DORIOL, GERARD	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0	
4x	A/T/S WEBBER, GISELA	1450 S BAYSHORE DR 901	MIAMI, FL.	
5x	(MARGA) MARGA ROBERT	1450 S. BAYSHORE DR 1505 MIAMI, FL 33131		
6x	OHALAKANI JOHN	1450 S. BAYSHORE DR 609 MIAMI, FL 33131		

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent
BERMAN, NEIL J DE LA TORRE, HELIO
ONE BISCAYNE TOWER 201 ALHAMBRA CIRCLE
2 SOUTH BISCAYNE SUITE 110Z
MIAMI, FL 33131 CORAL GABLES, FL 33134

8. Name and Address of New Registered Agent
Name of HELIO DE LA TORRE
Street Address 1 (Do NOT Use PO Box Number, 82) 201 ALHAMBRA CIRCLE
Street Address 2 (Do NOT Use PO, Box Number) 83 SUITE 110Z
City and State 84 CORAL GABLES FL
Zip Code 85 33134

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 FS.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. I 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 effects as if made under oath. I further certify 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, FS.

Signature _____ Date 7/1/90

Typed Name of Signing Officer or Director: GLADYS BARCELO Title: PRESIDENT Telephone Number: _____

11. Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee
Examined for
Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

**CORPORATION
ANNUAL REPORT
1991**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

RIL-991

**APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED**

FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE.

1. Name and Mailing Address of Corporation: **DOCUMENT #739533 (9)**

**COSTA BELLA ASSOCIATION, INC.
1450 S. BAYSHORE DRIVE
MIAMI, FLORIDA 33131-3612**

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21	Street Address
22	P.O. Box No.
23	City and State
24	Zip Code

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida 08/29/1984	4. FEI Number 59-1754406	FEI Number Applied For	5. \$8.75 Additional Fee required for a Certificate of Status
		FEI Number Not Applicable	CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1	2	3	4
Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
T/D	YOUNG, HERBERT	1450 S BAYSHORE DR 1804	MIAMI, FL 33131 0
P/D	BARCELO, GLADYS	1450 S BAYSHORE DR 1110	MIAMI, FL 33131 0
S/D	DORIOL, GERARD	1450 S BAYSHORE DR 1811	MIAMI, FL 33131 0
D	HENRIQUEZ, RENE	1450 S. BAYSHORE DR 711	MIAMI, FL 33131
T/D	CHALAKANI, JOHN	1450 S. BAYSHORE DR 609	MIAMI, FL 33131

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent DE LA TORRE, HELIO 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES, FL. 33134	8. Name and Address of Next Registered Agent
	81. Name
	82. Street Address 1 (Do NOT Use PO Box Number)
	83. Street Address 2 (Do NOT Use PO Box Number)
	84. City
	85. Zip Code

9. 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 _____ DATE _____
(Registered Agent Accepting Appointment)

10. I 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. I further certify that I am an officer or director of the corporation or the secretary or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE <i>Gladys M. Barcelo</i>	DATE 3/5/91
Typed Name of Signing Officer or Director Gladys M. Barcelo	Title President
	Telephone Number (Daytime) (305) 373-3100

FILING FEE OF \$61.25 REQUIRED - Make Checks Payable To: Secretary of State **\$8.75 Additional Fee required for a Certificate of Status**

CRESTOCK (1991)

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1992



FLORIDA DEPARTMENT OF STATE
Jan Smith
Secretary of State
DIVISION OF CORPORATIONS

JUL 27 1992

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT #739698 (9)**
COSTA BELLA ASSOCIATION, INC.
1450 S. BAYSHORE DRIVE
MIAMI FL 33131-3612

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address
22 P.O. Box No.
23 City and State
24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: **06/29/1984**

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

3a. Date of Last Report: **07/09/1991**
4. FEI Number: **59-1754406**
FEI Number Applied For:
FEI Number Not Applicable:
5. **\$8175 Additional Fee required for a Certificate of Status**
CERTIFICATE OF STATUS DESIRED:

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

1	2	3	4
Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1x	T/D	CHALAKANI, JOHN	1450 S BAYSHORE DR 604 MIAMI, FL 33131 0
2	P/D	BARCELO, GLADYS	1450 S BAYSHORE DR 1110 MIAMI, FL 33131 0
2x	S/D	DORIOL, GERARD	1450 S BAYSHORE DR 1811 MIAMI, FL 33131 0
3	D	HENRIQUEZ, RENE	1450 S BAYSHORE DR 711 MIAMI, FL
3x			
4			
4x			
5			
5x			
6			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent
DE LA TORRE, HELIO
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL. 33134

8. Name and Address of Non-Registered Agent
81 Name
82 Street Address 1 (Do NOT Use P.O. Box Numbers)
83 Street Address 2 (Do NOT Use P.O. Box Numbers)
84 City
85 Zip Code

9. Pursuant to the provisions of Sections 607 0502 and 607 1508 or Sections 617 0502 and 617 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 _____ DATE _____
(Registered Agent Accepting Appointment)

10. This Corporation has liability for intangible tax under S. 190-032, Florida Statutes. Yes No (See other side for information on intangible tax.)

11. I 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. I further certify 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 of Chapter B17, Florida Statutes, and that my name appears in Block 6 or an attachment with an address.

SIGNATURE *Gladys M. Barcelo* DATE **6/22/92**
Typed Name of Signing Officer or Director: **GLADYS M. BARCELO** Title: **VICE-PRESIDENT** Telephone Number (Daytime): **(305) 373-3100**

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee.

CR0304 (1/91)

File Now. Filing Fee after May 1 is \$225.00

APPROVED
AND
FILED

93 MAY -1 PM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
Jim Strom
Secretary of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation: **DOCUMENT # 739698 (9)**

COSTA BELLA ASSOCIATION, INC.
1450 S BAYSHORE DR
MIAMI FL 33131-3617

DO NOT WRITE IN THIS SPACE

2. Mailing Address
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Principal Place of Business
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified: **06/29/1984**
3a. Date of Last Report: **07/22/1992**
4. FEI Number: **591754406**
5. Certificate of Status Desired: \$6.75 Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: \$138.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032. File via Statutes: Yes No

9. Name and Address of Current Registered Agent

DE LA TORRE, HELIO
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
86 Country
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits the information 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 and I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0255, Florida Statutes.

SIGNATURE: _____
Registered Agent Accepting Appointment

DATE: _____

12. OFFICERS AND DIRECTORS

1.1 TITLE	CHAIRMAN / VP
1.2 NAME	CHALAKANI, JOHN
1.3 ADDRESS	1450 S BAYSHORE DR 604
1.4 CITY - ST - ZIP	MIAMI, FL 33131 0
2.1 TITLE	VP / D
2.2 NAME	BARCELO, GLADYS
2.3 ADDRESS	1450 S BAYSHORE DR 1110
2.4 CITY - ST - ZIP	MIAMI, FL 33131 0
3.1 TITLE	S / D
3.2 NAME	DORIOI, GERARD
3.3 ADDRESS	1450 S BAYSHORE DR 1811
3.4 CITY - ST - ZIP	MIAMI, FL 33131 0
4.1 TITLE	DIRECTOR
4.2 NAME	MAURICE, MAURICE
4.3 ADDRESS	1450 S BAYSHORE DR 744
4.4 CITY - ST - ZIP	MIAMI, FL 33131 0
5.1 TITLE	
5.2 NAME	
5.3 ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	
6.2 NAME	
6.3 ADDRESS	
6.4 CITY - ST - ZIP	

13. OFFICERS AND DIRECTORS CHANGES

1.1 TITLE	CHAIRMAN / D
1.2 NAME	CHALAKANI, JOHN
1.3 ADDRESS	1450 SE BAYSHORE DR. #604
1.4 CITY - ST - ZIP	MIAMI, FL 33131
2.1 TITLE	VICE PRESIDENT / D
2.2 NAME	BARCELO, GLADYS
2.3 ADDRESS	1450 SE BAYSHORE DR. #1207
2.4 CITY - ST - ZIP	MIAMI, FL 33131
3.1 TITLE	SECRETARY / D
3.2 NAME	DORIOI, GERARD
3.3 ADDRESS	1450 SE BAYSHORE DR #1811
3.4 CITY - ST - ZIP	MIAMI, FL. 33131
4.1 TITLE	DIRECTOR
4.2 NAME	MAURICE, MAURICE
4.3 ADDRESS	1450 SE BAYSHORE DR #910
4.4 CITY - ST - ZIP	MIAMI, FL. 33131
5.1 TITLE	DIRECTOR
5.2 NAME	WHITE, WILLIAM
5.3 ADDRESS	1450 SE BAYSHORE DR. #34
5.4 CITY - ST - ZIP	MIAMI, FLORIDA 33131
6.1 TITLE	
6.2 NAME	
6.3 ADDRESS	
6.4 CITY - ST - ZIP	

14. I certify that the information included 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. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12, Block 13 or on an attachment with an address.

SIGNATURE: John Chalakani
Print Name of Signing Officer or Director: John Chalakani
Title: Chairman

DATE: 2/19/93
Daytime Telephone (Area Code) Number: (305) 373-3100

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

94 MAY -1 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name COSTA BELLA ASSOCIATION, INC.		DOCUMENT # 739698 (9)	
2. Mailing Address 1450 S. BAYSHORE DRIVE MIAMI FL 33131-3612		Principal Place of Business 1450 S. BAYSHORE DRIVE MIAMI FL 33131-3612	

DO NOT WRITE IN THIS SPACE

3. Data Incorporated or Qualified 06/29/1984		3a. Date of Last Report 05/01/1993	
4. FEI Number 59-1754406		Applied For Not Applicable	
5. Certificate of Status Desired \$3.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
7. Nonprofit Exempt from \$138.75 Supplemental Fee		8. This corporation has liability for intangible tax under § 130.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent DE LA TORRE, HELIO 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES FL 33134				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
				85 FL		86 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits the 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 607.0503 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 TITLE	C/D CHALAKANI JOHN	13.1 TITLE	
12.2 NAME	CHALAKANI JOHN	13.2 NAME	
12.3 STREET ADDRESS	1450 SE BAYSHORE DRIVE #604	13.3 STREET ADDRESS	
12.4 CITY-ST-ZIP	MIAMI, FL 33131 0	13.4 CITY-ST-ZIP	
22.1 TITLE	P/D BARCELO, GLADYS	22.1 TITLE	VICE PRESIDENT
22.2 NAME	BARCELO, GLADYS	22.2 NAME	
22.3 STREET ADDRESS	1450 SE BAYSHORE DRIVE #1207	22.3 STREET ADDRESS	
22.4 CITY-ST-ZIP	MIAMI, FL 33131 0	22.4 CITY-ST-ZIP	
32.1 TITLE	S/D DORJOL, GERARD	32.1 TITLE	
32.2 NAME	DORJOL, GERARD	32.2 NAME	
32.3 STREET ADDRESS	1450 SE BAYSHORE DRIVE #1811	32.3 STREET ADDRESS	
32.4 CITY-ST-ZIP	MIAMI, FL 33131 0	32.4 CITY-ST-ZIP	
42.1 TITLE	B	42.1 TITLE	
42.2 NAME	MARKSIEL MAURICE	42.2 NAME	
42.3 STREET ADDRESS	1450 SE BAYSHORE DRIVE #910	42.3 STREET ADDRESS	
42.4 CITY-ST-ZIP	MIAMI FL	42.4 CITY-ST-ZIP	
52.1 TITLE	B	52.1 TITLE	
52.2 NAME	WHITE WILLIAM	52.2 NAME	
52.3 STREET ADDRESS	1450 SE BAYSHORE DRIVE #311	52.3 STREET ADDRESS	
52.4 CITY-ST-ZIP	MIAMI FL	52.4 CITY-ST-ZIP	
62.1 TITLE		62.1 TITLE	
62.2 NAME		62.2 NAME	
62.3 STREET ADDRESS		62.3 STREET ADDRESS	
62.4 CITY-ST-ZIP		62.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 117.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 118.07(3)(b), the extent that the information supplied is deemed exempt from public access. 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. I have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes, that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report or reports of Chapter 717, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or on an attachment, with an address.

SIGNATURE: John Chalakani 4/30/99 373-3100
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR