

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

**Important: Read the instructions on pages 1-9.**

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name <u>Ocean Hotels Invest Corp.</u>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No <u>1244 Ocean Drive</u>		Company NAIC Number:
City <u>Miami Beach</u>	State <u>FL</u>	ZIP Code <u>33139</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>PB 2-56 Lot 3 &amp; S5 Block 17 " Ocean Beach Addn No 2 " Of :Record Miami Dade Country Florida</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Hotel Commercial Bldg</u>		
A5. Latitude/Longitude: Lat. <u>25 Deg 47'00.82" N</u> Long <u>80 Deg 07'49.07" W</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>1A</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft	a) Square footage of attached garage <u>N/A</u> sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>	
c) Total net area of flood openings in A8.b <u>N/A</u> sq in	c) Total net area of flood openings in A9.b <u>N/A</u> sq in	
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>City Of Miami Beach 120651</u>		B2. County Name <u>Miami Dade County</u>		B3. State <u>Florida</u>	
B4. Map/Panel Number <u>12086C -0317</u>	B5. Suffix <u>L</u>	B6. FIRM Index Date <u>09/11/2009</u>	B7. FIRM Panel Effective/Revised Date <u>09/11/2009</u>	B8. Flood Zone(s) <u>"X"</u>	B9. Base Flood Elevation(s) (Zone AO. use base flood depth) <u>N/A</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2 a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: Name W-310 Elev 5.44 Vertical Datum: NGVD 1929  
 Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

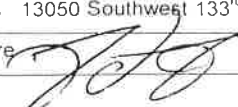
Check the measurement used.


a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>4.70</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>9.70</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>7.50</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.57</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <u>Armando F Alvarez 3rd</u>	License Number <u>5526</u>
Title <u>Surveyors &amp; Mappers</u>	Company Name <u>AFA &amp; COMPANY, INC</u>
Address <u>13050 Southwest 133<sup>rd</sup> Court</u>	City <u>MIAMI</u> State <u>FL</u> ZIP Code <u>33186</u>
Signature 	Date <u>12-06-2013</u> Telephone <u>305 234 0588</u>

*Handwritten:* #1526  
 12-06-2013  


# Building Photographs

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
1244 Ocean Drive

City Miami Beach

State FL

ZIP Code 33139

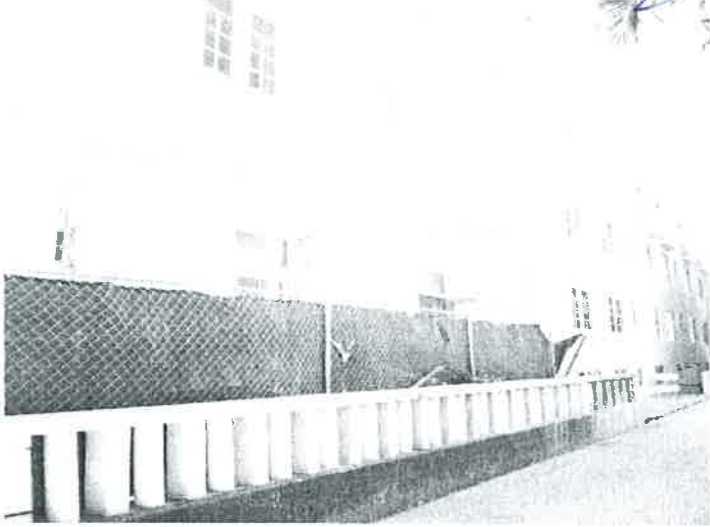
FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Right Side View



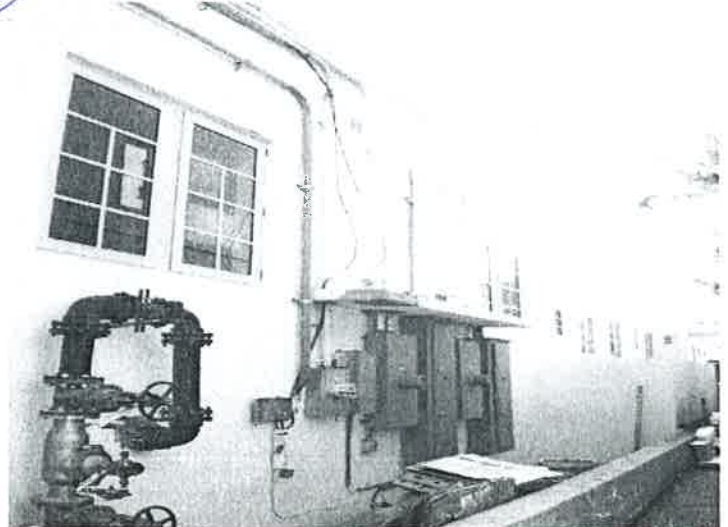
Front View



Rear View



Left Side View



**CITY OF MIAMI BEACH  
BUSINESS TAX RECEIPT**

1700 Convention Center Drive  
Miami Beach, Florida 33139-1819

TRADE NAME: OCEAN HOTELS INVEST CORP DBA CALA CAFE  
IN CARE OF: JUAN D'ONOFRIO  
ADDRESS: 1244 Ocean Dr  
MIAMI BEACH, FL 33139-4610

LICENSE NUMBER: RL-10007119  
Beginning: 10/01/2016  
Expires: 09/30/2017  
Parcel No: 0232340080380

TRADE ADDRESS: 1244 Ocean Dr

A penalty is imposed for failure to keep this Business Tax Receipt exhibited conspicuously at your place of business.

A Business Tax Receipt issued under this article does not waive or supersede other City laws, does not constitute City approval of a particular business activity and does not excuse the licensee from all other laws applicable to the licensee's business.

This Receipt may be transferred:

A. Within 30 days of a bonafide sale, otherwise a complete annual payment is due.

B. To another location within the City if proper approvals and the Receipt are obtained prior to opening of the new location.

Additional Information

Storage Locations

Code	Business Type
95009500	HOTELS (SMOKE DETECTOR)
95000700	ALCOHOL BEV. (NO LATER THAN 2AM)
95005805	DANCE HALL/ENTERT. W/ALCOHOL
95016400	RESTAURANT / BARS

Hotel: #Rooms	35
Restaurants/Bars: #Chairs	40

FROM: CITY OF MIAMI BEACH  
1700 CONVENTION CENTER DRIVE  
MIAMI BEACH, FL 33139-1819

PRESORTED  
FIRST CLASS  
U.S. POSTAGE  
PAID  
MIAMI BEACH, FL  
PERMIT No 1525

OCEAN HOTELS INVEST CORP DBA CALA CAFE  
850 Ocean Dr, Ste 203  
MIAMI BEACH, FL 33139-5826

