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

CORPORATION ANNUAL REPORT

1998

Principal Place of Business

SUITE 1325

22

23

24

12.

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Zip

505 SOUTH FLAGLER DRIVE

WEST PALM BEACH FL 33401

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 196189

(5)

Country

9. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

25

WEST PALM BEACH FL 33401

HANNA, PAUL B

PORCHER, HANK T

505 SOUTH FLAGLER DRIVE

505 SOUTH FLAGLER DRIVE

WEST PALM BEACH FL 33401

WEST PALM BEACH FL 33401

ALEXANDER, LARRY B 505 **SOUTH FLAGLER DRIVE**

SUITE 1100

505 SOUTH FLAGLER DRIVE

WEST PALM BEACH FL 33401

Mailing Address

SUITE 1325

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

MADEIRA SHOPPING CENTERS, INC.

Country

82

83

84 City

13.

1.1 TITLE

1.2 NAME

2.1 TITLE

2.2 NAME

3.1 THILE

3.2 NAME

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

1.3 STREET ADDRESS

2.3 STREET ADDRESS

3.3 STREET ADDRESS

3.4. CITY - ST- ZIP

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

04/30/98

5.4 CITY - ST - ZIP

2. 4 CITY - ST- ZIP

1.4 CITY - ST - ZIP

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

Name

30

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/21/1956 4. FEI Number Applied For 59-6065659 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 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. (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Change

Change

561-655-5337

Addition

FILED

May 14 1998 8:00am

Secretary of State

CITY-ST-ZIP 6.4 City-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on a prefactor of with any address.