

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -7 PH 2: 35

DOCUMENT # **L93735** (3)

1. Corporation Name
SUNSET COVE APARTMENTS, INC.

Principal Place of Business Mailing Address
27 TAHITI BEACH RD **27 TAHITI BEACH ISLAND RD**
100 SE 2ND ST #3600 **CORAL GABLES FL 33143**
CORAL GABLES FL 33143 **US**
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **08/16/1990** 3a. Date of Last Report **01/21/1994**
4. FEI Number **65-0216812** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **8818 SW 72nd St** 26 **8818 SW 72nd St**
Suite #, etc. **F-136** Suite #, etc. **F-136**
22 **F-136** 27 **F-136**
City & State 28 **Miami, FLA**
Miami, FLA City & State
23 **33173** 29 **33173**
Zip Country 30
33173 **33173**

9. Name and Address of Current Registered Agent
SIGEL, PHILIP A., ESQ.
8818 SUNSET DRIVE, SUITE F136
MIAMI FL 33173
10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 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 _____ (NOTE: Registered Agent signature required also on registration) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIGEL, PHILIP	1.2 NAME	
STREET ADDRESS	27 TAHITI BEACH ISLAND RD	1.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL GABLES FL	1.4 CITY - ST - ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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 110.07(3)(b), 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 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Philip Sigel* **2/1/95**
SIGNATURE AND TITLED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR