

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

CORPORATION
ANNUAL REPORT



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

1995
5-16-95

10-6-1995 C

APPROVED
AND
FILED

95 MAY 16 AM 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000042071 (9)**

1. Corporation Name

EDGEWATER INTERNATIONAL APARTMENTS, INC.

Principal Place of Business

1627 BRICKELL AVE
APT 1101
MIAMI FL 33129

Mailing Address

1627 BRICKELL AVE
APT 1101
MIAMI FL 33129

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/15/1993

3a. Date of Last Report

04/22/1994

4. FEI Number

65-0418535

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

21 2858 NW 79th Ave.

2a. Mailing Address

26 2858 NW 79th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Miami Fl.

City & State

28 Miami, Fl.

Zip

24 33122

Country

Zip

29 33122

Country

30

9. Name and Address of Current Registered Agent

BENITEZ, VILMA
1627 BRICKELL AVE
APT 1101
MIAMI FL 33129

10. Name and Address of New Registered Agent

81 Name

Benitez Vilma

82 Street Address (P.O. Box Number is Not Acceptable)

2858 NW 79th Ave

83

84 City

Miami

FL

85 Zip Code

33122

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

Signature (typed or printed name of registered agent and filer if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BENITEZ, VILMA
STREET ADDRESS 1627 BRICKELL AVE APT 1101
CITY - ST - ZIP MIAMI FL 33129

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Change Addition
1.2 NAME Benitez, Vilma
1.3 STREET ADDRESS 2858 NW 79th Ave
1.4 CITY - ST - ZIP Miami, Fl. 33122

TITLE NAME STREET ADDRESS CITY - ST - ZIP 2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP 3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP 4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP 5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP 6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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 if changed, or on an attachment with an address.

SIGNATURE: Vilma Benitez 5/11/95 305594-7878
SIGNATURE AND TYPED OR PRINTED NAME OF ORIGINAL OFFICER OR DIRECTOR (Name) (Optional if True)