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

PROFIT
CORPORATION
ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 29 1998 8:00am

Secretary of State

A CRASANAL ALM EXILAM CIRLLE ARTICL MARKE MARKE MARKE ALAMA ISANA ALIAM ALIAM ARKICLARIA

Secretary of State
DiVISION OF CORPORATIONS

DOCUMENT # P96000021335 (0)

A & M PROPERTY MANAGEMENT, INC.

									AF AND AND NA
Principal Place of Business Mailing Address							// 84 //8 11 68 / 118/	DO ELEBO SPEL DOOL	
3475 HIATUS RD SUNFISE FL 33351 US				3475 HIATUS RD SUNRISE FL 33351 US			DO NOT WRITE	IN THIS SPACE	
							3. Date Incorporated or Qualified 03/05/1996		
2. 21	Principal Place of Bu	siness	<u> </u>	2a. Mailing Address 26			4. FEI Number 65-0653153		Applied For Not Applicable
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional e Required
	City & State		City & S	City & State			6. Election Campaign Financing	\$5.	00 May Be
_	Zip	Country	28 Zip				Trust Fund Contribution 8. This corporation owes or has pai		ded to Fees r Intangible
24		25	29	3	0		Personal Property Tax due June		□ No
g, Name and Address of Current Registered Agent						T	10. Name and Address of New Reg	jistered Alent	
WALDRON, ANNIE M						Name			
3475 HIATUS RD					82	Street Add	dress (P.O. Box Number is Not Acceptabl	e)	
SUNRISE FL 33351					83				
					84	City		FL 85 2	Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above							portation submits this statement for the pu	unnee of changin	ng its registered
	agent. I am familiar	with, and act of the obligat	ions of, Section	607.0505, Florid	da Statute	P. A. I	ation's board of directors. I hereby accept	tine appointment	as registered.
SIC	SNATURE TIN	D8_WARIE	INA	(2 6 N)	. V.I'	·(Vyl)	ye Drane (N.	MENY	-15/9 d
12		ed or printed name of registered agent OFFICERS AND		NOTE F	13.	on signatur requ	ured when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE	TODO IN 18
TITL		OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	DELETE	1.1 TITLE	' 1	ADDITIONS/CHANGES TO OFFICE	Chan	
NAN	AE WALD	RON, MALCOLM H III			1.2 NAME			_	_
STR	STREET ADDRESS 1620 N.W. 100TH TERRACE			1.3 STREET ADDRESS		ADDRESS			
CITY	r-st-zip PLANT	ATION FL 33322			1.4 CiTY-S	iT - ZiP			
TITL	e SVD			DELETE	2.1 TITLE			☐ Chan	ge Addition
NAA		ron, anne m			2.2 NAME				
STR		I.W. 100TH TERRACE			2.3 STREET	ADDRESS			
CIT	(-ST-ZIP PLANT	ATION FL 33322			2. 4 CITY - 5	ST-21P			
TITL	E			DELETE	3.1 TITLE			☐ Chan	ge 🔲 Addition
NAN	AE .				3.2 NAME				
STR	EET ADORESS				3.3 STREET	ADDRESS			
	/-ST-ZIP			Toriere	3.4. CITY - 5	ST-ZIP		По	
TITL			L	DELETE	4.1 TITLE			Chang	ge L. Addition
NAN	_				4.2 NAME	ADDRESO			1
i	EET ADDRESS	*			4.3 STREET	1			İ
TITL	(-ST-ZIP			DELETE	4.4 CITY - S 5.1 TITLE	11 - ZIP		☐ Chane	ge Addition
NAN					5.2 NAME	İ			go
	EET ADDRESS				5.3 STREET	ADDRESS			
	-ST-ZIP				5.4 CITY-S				
TITL				DELETE	6.1 TITLE	4 411		Chang	ge Addition
NAN	1		, -		6.2 NAME				· -

14. Thereby 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 907, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, onto an attribute with an address.

6.3 STREET ADDRESS