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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 11 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

	MENT # P9700 OA REAL ESTATE, INC.	0041621 (8)			
Principal Plac	e of Business	Mailing Address			1061 11616 Build 11061 1151 1051
		6401 S.W. 145TH STREE	т	1	
MIAMI FL 33158 MIAMI FL 33158			•		0.00.00
				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
9 Principal P	Place of Business	2a. Mailing Address		05/07/1997 4. FEI Number	Applied For
21	lace of Oddiness	26		· / El lagridol	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22]		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the d	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
	INASSAR, GEORGE		O Name		
6401 \$.W. 145TH STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
Min	AMI FL 33158		63		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607 05	02 and 607.1508. Florida Statut	es, the above-named cor		
office or I	registered agent, or both, in the State	e of Florida. Such change was a	authorized by the corpora	poration submits this statement for the purpose ition's board of directors. I hereby accept the a	ppointment as registered
	in ranged with and accept the oblig	janons en, econon correcte, i a	onda Giatatos.		
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NOT	E. Registered Agent signature requ		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	BUNASSAR, GEORGE		1.2 NAME		
STREET ADDRESS	6401 S.W. 145TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33158	DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE		ביי הנינונ	2.1 THTLE		Citalige L Roullion
NAME OXDEET ADDRESS			2.2 NAME		
STREET ADDRESS			2.3 SYREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. City-St-ZiP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	· · ·		6 3 STREET ADDRESS		
CITY, ST. 7IP	ſ		64 CiTY-St-ZiP		4

14. I hereby certify that the information supplied with this filling 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 eath; 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.