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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham.

FILED

Mar 19 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000060273 (5)

TAMIAMI PROPERTIES, INC.

Principal Place of Business Mailing Address 700 BW 96 AVE MIAMI FL 93135 700 SW 36 AVE MIAMI FL 33135-4124 3. Date Incorporated or Qualified 3a. Date of Last Report 07/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0680969 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DE NAVARRA, CARLOS T 700 SW 38 AVE Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33135** 83 Zip Code City 85 11. Pursuant to the provisions of Section (607.050) 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. If 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 afform the obligations of, Section 607.0505, Florida Statutes. FELIPE A. VALLS, JR 2-19-97 SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. 13. DELETE Change Addition TITLE 1.1 TITLE PRESIDENT DE NAVARRA, CARLOS T VALLS, FELIPE A, JR NAME 1.2 NAME 700 SW 36 AVE 700 S.W. 36th AVE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33135** MIAMI, FL. 33135 CITY-ST-ZIP 1.4 CITY - \$1 - ZIP Addition DELETE Change TITLE 2.1 TITLE SECRETARY VALLS, PELIPE A.SR NAME 2.2 NAME 700 SW. 36th. AVE STREET ADDRESS 23 STREET ADDRESS MIAML, FL 33135 CITY-ST-ZIP 2. 4 CHY-ST-ZIP TITLE DELETE 3.1 THILE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CHY-ST-ZIP DELETE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(TY - ST - Z(P) DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-S1-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this annual report or furplement annual port is true and accurate and that my signature shall have the same legal effect as if made under on I am an officer or director of the corporation of the receipt 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 the example with an address.