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

PROFIT CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Apr 21 1998 8:00am Secretary of State

1. Corporation	MENT # G62064 ANCERS LOFT, INC.	4 (2)			Ali alah atah atah atah bah 1848 ba
Principal Place	e of Business	Mailing Address		·	.CU 01011 81711 61814 41811 1841
4656 SW 72ND AVENUE MIAMI FL 33155		4656 SW 72ND AVENUE MIAMI FL 33155			
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	33.1102
:				08/30/1983	
 '	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# ofc	26	· · · · · · · · · · · · · · · ·	59-2330386	Not Applicable \$8.75 Additional
		27		5. Certificate of Status Desired	Fee Required
City & State	0	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip	Country 30	This corporation owes or has paid the c Personal Properly Tax due June 30.	
	9, Name and Address of Curren		1441	10. Name and Address of New Registere	d Agent
GORDON, LEWIS G. E			81 Name		
1320 S. DIXIE HWY.		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
CORAL GABLES FL 33146			83		
			84 City	F	85 Zip Code
11. Pursuant office or nagent. La	to the provisions of Sections 607,050/ egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Honda, Such change was a trions of, Section 607.0505, Flo	es, the above-named corpora authorized by the corpora orida Statules.	poration submits this statement for the purpose from's board of directors. I hereby accept the ap	of changing its registered ppointment as registered
	Signature typed or predectinance of regeneral ages		Registered Agent signature requ		UD BUDEOTODO (N. 40
12.	OFFICERS AND	DIRECTORS DILETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	DANLEY, SUZANNE G		1.2 NAME	•	
STREET ADDRESS	6820 SW 125 TERRACE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		14 CITY - ST - 7/P		
THLE	DP	DECETE	2.1 TiTLE		Change Addition
NAME	PEASE, JOANNE		2.2 NAME		
STREET ADDRESS	6820 SW 125 TERRACE		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2. 4 CITY-S1-7IP 3 1 HILL		Change Addition
NAME		10.1 VIV.	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST- ZIP		
TOTLE		DELETE	4.1 Tille		Change Addition
NAME			4. 2 NAME		ĺ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CHY- \$1-7IP		Change Addition
TITLE NAME		[_] MILIE	51 TITLF 5.2 NAME		T Owner T Volution
STREET ADDRESS			5.2 NAVIE 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 1II (f		Change Addition
NAME			62 NAML		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6.4 CHY-ST-7IP		

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 supplied control annual report or supplied control 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 ampowered 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.