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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

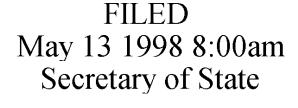
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M17536

(7)

676 APARTMENTS CORPORATION



Principal Place of Business Mailing Address				1 PONDER HEN HEN FROM DEBUT BERKE BERKE VILLE HER HENDEN I	LANI BERNI DIBNE EDDE		
676 SW 2ND STREET 6801 NW 153 TERR MIAMI FL 33130 MIAMI FL 33016							
US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 07/02/1985		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 26					59-2548208	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, 27		Suite, Apt. #, etc.	etc.			75 Additional ee Required	
City & State City & State						.00 May Be	
23 28		28				ded to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current ye	ar Intangible	
24	25 29 30		30		Personal Property Tax due June 30. Yes No		
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PAZ MARTA 81 Name							
PAZ, MARTA				Name			
8801 NW 153 TERR MIAMI FL 33016			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
""	7411 1 E 30010		83				
			84	City	FL ⁸⁵	Zip Code	
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, the purpose of the obligations of Section 507.0505. Florida Statutes							
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 a		Registered Age	ni signature require	ed when reinstating) DATE		
12.			13.	· , · · · · -	ADDITIONS/CHANGES TO OFFICERS AND DIREC		
NAME	DAT ODIANDO		1.1 TITLE		Cha	ange L. Addition	
STREET ADDRESS	8801 NW 153 TERR		1.2 NAME 1.3 STREET ADDRESS				
CITY-ST-ZIP	MIALE EI						
TITLE	1	DELETE	1.4 CITY - ST	1-2IP	☐ Cha	inge Addition	
NAME	PAZ, MARTA		22 NAME			Ingo Padillon	
STREET ADDRESS	8801 NW 153 TERR		2 3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.4 CITY-S	T-ZIP		ł	
TITLE			31 TITLE		☐ Cha	nge Addition	
NAME	· · · ·		3.2 NAME				
STREET ADDRESS	3.3		3.3 STREET	ADDRESS			
CITY-ST-ZIP				T-ZIP			
TITLE NAME			4.1 TITLE		☐ Cha	inge [_] Addition	
STREET ADDRESS			4. 2 NAME				
CITY-ST-ZIP			4.3 STREET				
TITLE		☐ DELETE	4.4 CITY - ST 5.1 TITLE	ı-zır	□ Cha	nge Addition	
NAME			5 2 NAME		_ 010	- La regulion	
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST				
TITLE		DELETE	6.1 TITLE		Cha	nge Addition	
NAME	6.2		6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST	- ZIP			
14. I hereby c	ertify that the information supplied	with this filing does not qualify for	the exempt	ion stated in S	Section 119.07(3)(i), Florida Statutes. I further certify tha	t the information	

indicated on this annual report or 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 suppliemental 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 in address.

SIGNATURE

Marta John WOUNDER

4/20/98 305-828 0009