

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

FILED

Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 219296 (1)

1. Corporation Name
DCA HOMES, INC.

Principal Place of Business 700 N.W. 107TH AVE., 4TH FL MIAMI FL 33172	Mailing Address 700 N.W. 107TH AVE., 4TH FL MIAMI FL 33172
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Incorporated or Qualified 01/17/1959
21		26		4. FEI Number 59-0867091
22		27		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent WATSKY, MORRIS J. 700 NW 107TH AVENUE MIAMI FL 33172		10. Name and Address of New Registered Agent 81 Name Rubin, Shelly, VP-FINANCE 82 Street Address (P.O. Box Number is Not Acceptable) 760 NW 107 AVE 83 84 City MIAMI FL 85 Zip Code 33172	
---	--	--	--

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. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Shelly Rubin* **Shelly Rubin** **3/30/98**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD ☐ DELETE	1.1 TITLE	D ☒ Change ☐ Addition
NAME	MILLER, LEONARD	1.2 NAME	
STREET ADDRESS	700 NW 107 AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	VD ☒ DELETE	2.1 TITLE	DC ☐ Change ☒ Addition
NAME	BOLOTIN, IRVING	2.2 NAME	Miller, Stuart A.
STREET ADDRESS	700 NW 107 AVENUE	2.3 STREET ADDRESS	760 NW 107 AVE
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FL 33172
TITLE	VD ☐ DELETE	3.1 TITLE	C ☐ Change ☒ Addition
NAME	PEKOR, ALLAN J.	3.2 NAME	Saiontz, Steven J.
STREET ADDRESS	700 NW 107 AVENUE	3.3 STREET ADDRESS	760 NW 107 AVE
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI, FL 33172
TITLE	V ☒ DELETE	4.1 TITLE	V ☐ Change ☒ Addition
NAME	JAFFE, JONATHAN M.	4.2 NAME	Rubin, Shelly
STREET ADDRESS	700 NW 107TH AVE	4.3 STREET ADDRESS	760 N.W. 107 AVE
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	MIAMI FL 33172
TITLE	T ☒ DELETE	5.1 TITLE	T ☐ Change ☒ Addition
NAME	SALEDA, M. E.	5.2 NAME	JORDAN, MARGARET
STREET ADDRESS	700 NW 107 AVENUE	5.3 STREET ADDRESS	760 NW 107 AVE
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	MIAMI FL 33172
TITLE	AS ☒ DELETE	6.1 TITLE	AS ☐ Change ☒ Addition
NAME	SANTAELLA, GRACE	6.2 NAME	Mc mickle, J.T.
STREET ADDRESS	700 NW 107 AVENUE	6.3 STREET ADDRESS	760 NW 107 AVE
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	MIAMI FL 33172

14. I hereby 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *J. T. McMickle* **J. T. McMickle 3/21/98 365/485-2000**

CR2E034 (10/97)