

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morshen
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

55 MAY -1 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **319386** (9)
1. Corporation Name
DEVCO SHOPPING CENTER, INC.

Principal Place of Business Mailing Address
**700 NW 107TH AVENUE
4TH FLOOR
MIAMI FL 33172** **700 NW 107TH AVENUE
4TH FLOOR
MIAMI FL 33172**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified: **07/31/1967** 3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-1204087** Applicable For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
7. This corporation has notice for intangible tax under 2-1391 of Florida Statutes: Yes No

2. Principal Place of Business: 2a. Mailing Address:
21. State: 22. City & State: 23. City & State: 24. City & State: 25. City & State: 26. State: 27. City & State: 28. City & State: 29. City & State: 30. City & State:

9. Name and Address of Current Registered Agent
**WATSKY, MORRIS J., ESQ.
700 NW 107TH AVENUE
4TH FLOOR
MIAMI FL 33172**

10. Name and Address of New Registered Agent
81. Name: 82. Street Address (P.O. Box Number is Not Acceptable):
83. 84. City: 85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 897.002 and 897.15(3), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, if 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 897.002, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

11A. TITLE: CD	MILLER, LEONARD
11B. NAME:	700 N.W. 107TH AVE.
11C. STREET ADDRESS:	MIAMI FL
11D. CITY, ST. ZIP:	
11E. TITLE: VD	BOLOTIN, IRVING
11F. NAME:	700 N.W. 107TH AVE.
11G. STREET ADDRESS:	MIAMI FL
11H. CITY, ST. ZIP:	
11I. TITLE: AS	SANTAELLA, GRACE
11J. NAME:	700 N.W. 107TH AVE.
11K. STREET ADDRESS:	MIAMI FL
11L. CITY, ST. ZIP:	
11M. TITLE: AS	SIERRA, E. KATHLEEN
11N. NAME:	700 N.W. 107TH AVE.
11O. STREET ADDRESS:	MIAMI FL
11P. CITY, ST. ZIP:	
11Q. TITLE: VT	SALEDA, M.E.
11R. NAME:	700 N.W. 107TH AVE.
11S. STREET ADDRESS:	MIAMI FL
11T. CITY, ST. ZIP:	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME:	
12. STREET ADDRESS:	
12. CITY, ST. ZIP:	
13. TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. NAME:	
13. STREET ADDRESS:	
13. CITY, ST. ZIP:	
14. TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME:	
14. STREET ADDRESS:	
14. CITY, ST. ZIP:	
15. TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
15. NAME:	
15. STREET ADDRESS:	
15. CITY, ST. ZIP:	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and claims real quality for the exemption stated in Section 119.032(9), Florida Statutes. I further certify that the officers and directors on this annual report or supplementary annual report are 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 this corporation, the filer of this report, and that I am authorized to execute this report as required by Chapter 192, Florida Statutes, and that my name appears in Block 12, with the title of officer or director, of the corporation named herein.

SIGNATURE: *Grace Santaella* Grace Santaella 4/17/95 (305) 229-6400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR